

Independent Bookstore Cash Count & Variance Form

Store & Date Details

Store Name

Date

Cashier Name

Shift

Cash Count

Denomination	Quantity	Total
100	<input type="text"/>	<input type="text"/>
50	<input type="text"/>	<input type="text"/>
20	<input type="text"/>	<input type="text"/>
10	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>
1	<input type="text"/>	<input type="text"/>
Coins	<input type="text"/>	<input type="text"/>
Grand Total		<input type="text"/>

Expected Amount

Expected Cash in Register

Variance

Variance (Over/Short)

Notes / Explanation

Supervisor Review

Supervisor Name

Review Date