



Cash Verification Form
First Baptist Church of District Heights

Date: _____

Ministry/Budget: _____

Currency Breakdown

COIN:

Pennies: _____
Nickels: _____
Dimes: _____
Quarters: _____
Dollars: _____
Other: _____
Total: _____

CASH:

\$1: _____
\$5: _____
\$10: _____
\$20: _____
\$50: _____
Other: _____
Total: _____

CHECKS:

Check# _____
Check#: _____
Check#: _____
Check# _____
Check#: _____
Check# _____
Check# _____

Amount: _____
Amount: _____
Amount: _____
Amount: _____
Amount: _____
Amount: _____
Amount: _____

Total: _____

GRAND TOTAL: _____

Verification

Signature: _____
Ministry Representative

Date: _____

Signature: _____
Ministry Representative

Date: _____