Cashier Summary

DATE _____ DAY _____ PREPARED BY _____

Shift _____

		Bar Register				Service Register				Total
		Day		Night		Day		Night		All Shifts
1	Bank Deposit Part I									
2	Currency									
3	Silver									
4	Checks									
5	Subtotal									
6	Credit Cards:									
7	MasterCard/Visa									
8	American Express									
9	Diners Club									
10	Other									
11	Other Receipts:									
12	Total Bank Deposit									
13	Cash Summary Part II									
14	Sales per Register									
15	Sales Tax per Register									
16	Adjustments:									
17	Over/Under Rings									
18	Other: Complimentaries									
19	Other									
20	Total Adjustments									
21	Sales to be Acctd. For									
22	Sales Tax to be Acctd. for									
23	Accounts Collected									
24	Other Receipts:									
25										
26										
27	Tips Charged:									
28	MasterCard/Visa									
29	American Express									
30	Diners Club									
31	Other									
32	House Accounts-Tips									
33	Total Receipts									
34	Deduct: Paidouts									
35	Tips Paid Out									
36	House Charges									
37	Total Deductions									
38	Net Cash Receipts									
39	Bank Deposit (Line 12)									
40	(Over) or Short									