

# CASH SHEET

<b>Organization Name</b>		<b>Name of Event/Fundraiser</b>	
<b>Contact Name</b>		<b>Contact Phone #</b>	
<b>Mailing address</b>		<b>City &amp; Postal Code</b>	
<b>What area of the Kelowna General Hospital is this event/fundraising initiative supporting?</b>			
<b>Additional Comments</b>			

Denomination	Quantity	Amount
<b>Bills</b>		
\$ 100.00		
\$ 50.00		
\$ 20.00		
\$ 10.00		
\$ 5.00		
<b>Bills Sub-Total</b>		
<b>Coins</b>		
\$ 2.00		
\$ 1.00		
\$ 0.25		
\$ 0.10		
\$ 0.05		
<b>Coins Sub-Total</b>		
<b>Total Amount</b>		

<b>Counted by</b>		<b>Date</b>	
<b>Witness</b>		<b>Date</b>	

Thank-you for your support!