

| Cash Log                                         |               |               |      |               |             |           |         |           |       |             |              |                |  |
|--------------------------------------------------|---------------|---------------|------|---------------|-------------|-----------|---------|-----------|-------|-------------|--------------|----------------|--|
| Till 1                                           | Cashier Name  | Time Assigned | Skim | Expected Cash | Actual Cash | +/-       | Refunds | Discounts | Voids |             |              | Total Cash     |  |
|                                                  | GY            |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  | AM            |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  | PM            |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  | Till 2        | GY            |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
| AM                                               |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
| PM                                               |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
| DT                                               |               | GY            |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  | AM            |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  | PM            |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  |               |               |      |               |             |           |         |           |       |             |              |                |  |
|                                                  | Safe Controls |               |      |               |             |           |         | Deposits  |       |             |              |                |  |
|                                                  |               | AM            | MID  | PM            | GY          |           |         | Amount    | MOD   | Verified By | Deposited By | Deposited Date |  |
| Backup Cash - 250                                |               |               |      |               |             | Deposit 1 |         |           |       |             |              |                |  |
| Till Float - 250                                 |               |               |      |               |             | Deposit 2 |         |           |       |             |              |                |  |
| Petty Cash - 300                                 |               |               |      |               |             | Deposit 3 |         |           |       |             |              |                |  |
| Total Safe - 800                                 |               |               |      |               |             |           |         |           |       |             |              |                |  |
| Restaurant Manager Verification _____ Date _____ |               |               |      |               |             |           |         |           |       |             |              |                |  |