

Organization Name _____
 Date: _____ Time of draw: _____
 Event: _____ Licence # _____

Ticket Reconciliation Control Sheet

Seller's Name Or Place of Sale	Ticket Type by color or price	Finish Number	Start Number	Ticket Sold	Gross Sales	Unsold Tickets by series

Prize Winners Control Sheet

Winner's List Verification

Prize # (1 st , 2 nd 3 rd etc)	Serial # of winning ticket	Name of Winner	Address & Telephone number	Signature

Name and Signature of Volunteer # 1

Name and Signature of Volunteer # 2

Board Member

Organization Name _____
 Date: _____ Time of draw: _____
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CASH COUNT for Seller or Place of Sale: _____

Cash		Total	
	X \$1.00		
	X \$2.00		
	X \$5.00		
	X \$10.00		
	X \$20.00		
	X \$50.00		
	coin		
Total Cash		\$	_____
Cash over/short		\$	_____
Less Float		\$	_____
Cost of prizes		\$	_____
Net Proceeds from Event		\$	_____

Remitted by:

Deposited by:

Date Deposited:

Note:
 There should be one Cash Count Form for each seller listed in the Ticket Reconciliation Control Sheet