Form No. FS:FO-1159 (Rev., 8/92)

ANNUAL/SEMIANNUAL UNANNOUNCED CASE VERIFICATION

DATE _____

Cash on Hand	$_____
Uncashed Treasury Checks	_____
Interim Receipts for Cash	_____
Unpaid Subvouchers	_____
Replenishment Vouchers to FC	_____
Total Cash Accountability	_____
Total Fund (Actual)	_____
Total Fund (Authorized)	_____
Cash Over (Short)	_____

We, the undersigned, certify that the cash stated above has been verified by actual count and that all the above items, unless otherwise noted, have been found to be in agreement with the appropriate accounting records.

_____	_____	_____
Signature	Title	Date
_____	_____	_____
Signature	Title	Date