

Retail Store Opening Cash Register Setup Form

Date

Store Location

Register Number

Employee Name

Denomination	Quantity	Total Amount
\$100 Bills	<input type="text"/>	<input type="text"/>
\$50 Bills	<input type="text"/>	<input type="text"/>
\$20 Bills	<input type="text"/>	<input type="text"/>
\$10 Bills	<input type="text"/>	<input type="text"/>
\$5 Bills	<input type="text"/>	<input type="text"/>
\$1 Bills	<input type="text"/>	<input type="text"/>
Coins	<input type="text"/>	<input type="text"/>
Total Cash		<input type="text"/>

Notes / Irregularities

Employee Signature

Supervisor Signature