

DEPARTMENT OF HOMELAND SECURITY
U.S. COAST GUARD

CASHIER ACCOUNTABILITY REPORT

APPROVED RCN 7210-1

FOR PERIOD	UNIT OPFAC NUMBER	CASHIER DESIGNATION
CHECK APPROPRIATE BOX (X) <input type="checkbox"/> MONTHLY <input type="checkbox"/> VERIFICATION <input type="checkbox"/> TRANSFER <input type="checkbox"/> LIQUIDATION	UNIT NAME	
	ADDRESS	
	NUMBER OF DAYS UNDER WAY	

STATUS OF FUNDS	DOLLARS	CENTS	REMARKS
THIS VOUCHER			
UNPAID REIMBURSEMENT VOUCHER DATED <i>(IF MORE THAN ONE LIST UNDER REMARKS)</i>			
UNSCHEDULED SUBVOUCHERS			
INTERIM RECEIPTS FOR CASH			
CASH ON HAND			
ADVANCE ON REIMBURSEMENT CHECKS ON HAND			
RECEIPTS FOR ADVANCES TO ALTERNATIVES			
RECEIPTS FOR ADVANCES TO SUB-CASHIERS			
OTHER <i>(SPECIFY)</i>			
TOTAL ACCOUNTABILITY			
AUTHORIZED ACCOUNTABILITY (OF-211)			
DISBURSEMENT BREAKDOWN			
TYPES OF DISBURSEMENTS	NUMBER		
PURCHASES			
TRAVEL ADVANCES			
PERSONAL CHECKS CASHED			
REGULAR PAYROLL			
EMERGENCY PAYROLL			
PCS ADVANCES			
TOTAL			
LOST/UNACCOUNTED FOR FUNDS THIS MONTH			
REIMBURSEMENTS THIS MONTH (USE JULIAN DATES)			
DATE REQUESTED	DATE RECEIVED		
<i>(MAY BE CONTINUED ON A SEPARATE SHEET)</i>	TOTAL		

ACCOUNTING DATA

NUMBER OF REIMBURSEMENT CHECKS DESIRED _____ IN THE AMOUNTS OF _____
 COMMENTS:

TYPED NAME, RANK OR GRADE, CASHIER	DATE	SIGNATURE
TYPED NAME, RANK OR GRADE, ACO	DATE	SIGNATURE
TYPED NAME, RANK OR GRADE, TITLE	DATE	SIGNATURE

VERIFICATION OF ACCOUNTABILITY

We, the undersigned, at _____, on _____, counted the cash and verified the assets on hand, assets in transit, and transfer of accountability by examination of documents and records, and found the accountability to be as reported above.

TYPED NAME, RANK OR GRADE, AND TITLE

SIGNATURE

TYPED NAME, RANK OR GRADE, AND TITLE

SIGNATURE

TYPED NAME, RANK OR GRADE, AND TITLE

SIGNATURE

