



ARCHDIOCESE OF AGANA

Finance Office

COLLECTION COUNT SUMMARY

Name of Parish: _____

Date of Collection: _____

Date Counted: _____

TYPE:	1ST Coll.	2ND Coll.	SPECIAL	TOTAL
COIN	\$ _____	\$ _____	\$ _____	\$ _____
CURRENCY	\$ _____	\$ _____	\$ _____	\$ _____
CHECKS	\$ _____	\$ _____	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____	\$ _____	\$ _____

Summary prepared by (print): _____

Signatures of Counters:

1. _____

4. _____

2. _____

5. _____

3. _____

6. _____

INSTRUCTION:

1. Staple the bank issued deposit slip on top of page.
2. Keep this completed form in parish records.
3. If you have any questions, please call the Accountant's Office at the Chancery at (671) 562-0013 during office hours.

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