

CUSTOMER ID NUMBER:

CONTROL

**OFFERING CONTROL SHEET**

(For use of this form, see Fort Hood Chaplains' Fund SOP. Proponency is the Installation Chaplain.)

**SECTION I - ADMINISTRATIVE DATA**

1. DATE:	2. SUBACCOUNT:	3. LOCATION:	4. TIME:	5. DENOMINATION:
6. ATTENDANCE:		7. BAG NUMBER:	8. SERVICE CONDUCTED BY:	
9. OFFERING DESIGNATED TO:				10. AUTHORITY:

**SECTION II - OFFERING CONTROL RECORD**

DESIGNATED OFFERINGS must be announced to the congregation before collection. Attach copies of printed announcement to this sheet.

U.S. DOLLARS - CHECKS		U.S. DOLLARS - CHECKS (CONT)		U.S. DOLLARS - COIN		
CHECK NO / NAME a.	AMOUNT b.	CHECK NO / NAME c.	AMOUNT d.	DENOM e.	QTY f.	AMOUNT g.
1.		25.		\$	.01	
2.		26.		\$	.05	
3.		27.		\$	.10	
4.		28.		\$	.25	
5.		29.		\$	.50	
6.		30.		\$	1.00	
7.		31.		<b>TOTAL COIN</b>		
8.		32.		U.S. DOLLARS - CURRENCY		
9.		33.		DENOM	QTY	AMOUNT
10.		34.		33.	1.00	
11.		35.		34.	2.00	
12.		36.		35.	5.00	
13.		37.		36.	10.00	
14.		38.		37.	20.00	
15.		39.		38.	50.00	
16.		40.		39.	00.00	
17.		41.		<b>TOTAL CURRENCY</b>		
18.		42.		U.S. DOLLARS TOTALS		
19.		43.		COIN		
20.		44.		CURRENCY		
21.		45.		CHECKS		
22.		46.		<b>TOTAL DOLLARS</b>		
23.		47.		<b>TOTAL CHECKS</b>		
24.						

**SECTION III - AUTHENTICATION**

11. COUNTED BY (PRINT AND SIGN):	12. COUNTED BY (PRINT AND SIGN):
13. VERIFIED AND SECURED BY (PRINT AND SIGN):	14. ACCEPTED FOR DEPOSIT BY (PRINT AND SIGN):
15. CERTIFIED BY CHAPLAIN IN CHARGE:	
THIS CERTIFIES THAT THE APPROPRIATE MANAGEMENT CONTROLS WERE FOLLOWED:	
<input type="checkbox"/> SERVICES CONDUCTED	<input type="checkbox"/> NOT CONDUCTED
<input type="checkbox"/> OFFERING RECEIVED	<input type="checkbox"/> NOT RECEIVED
SIGNATURE (PRINT AND SIGN) _____	