

**South Cove Community Health Center
Daily Closing Report Location: Quincy**

Date: _____

Instructions:

1. Each location will print out eClinicalWorks Day Sheet or QS1 Cash Analysis reports.
2. Balances of Cash, Checks, or Credit Cards should be reported from the reports in Column 2. Actual Cash, Checks, and Credit Card amounts should be reported in Column 3. Both Column 2 and Column 3 should match.
3. Checks and Cash are to be deposited daily. Attach all credit card receipts, credit card settlement slip, deposit slip and Day Sheet/Cash Analysis reports to form and submit to Accounting.
4. If there is a mismatch between Column 2 and Column 3 please check for error and/or contact accounting department.

88 Holmes Reception Desk		Submitted by: _____
	ECW Balance	Cash/Checks/CC Settlement Balance
Cash		
Check		
Credit Card		
Total		

88 Holmes Pediatrics		Submitted by: _____
	ECW Balance	Cash/Checks/CC Settlement Balance
Cash		
Check		
Credit Card		
Total		

88 Holmes Dental/Optomtry/Behavioral Health		Submitted by: _____
	ECW Balance	Cash/Checks/CC Settlement Balance
Cash		
Check		
Credit Card		
Total		

88 Holmes OB/Gyn		Submitted by: _____
	ECW Balance	Cash/Checks/CC Settlement Balance
Cash		
Check		
Credit Card		
Total		

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435 Hancock Reception		Submitted by: _____
	ECW Balance	Cash/Checks/CC Settlement Balance
Cash		
Check		
Credit Card		
Total		

435 Hancock Pharmacy		Submitted by: _____
	ECW Balance	Cash/Checks/CC Settlement Balance
Cash		
Check		
Credit Card		
Total		

Grand Total of All Locations		
	All ECW/QS1 Balances	Cash/Checks/CC Settlement Balance
Cash		
Check		
Credit Card		
Total		

Medical Records		Submitted by: _____
Cash		
Check		
Credit Card		
Total		

Bank Deposit		Performed by: _____
Cash		
Check		
Total		