

3. Client agrees to report to FP any loss involving a check processed by a FP Associate within three (3) days of the date of said check's return to Client.
4. Client Agrees to hold FP harmless for the sums of money in any temporary tellers cash box in excess of the \$10,000.00 operating limit.
5. Client agrees that no employee or officer of the client is authorized or allowed to operate or utilize a cash box operated in whole or in part by a FP Associate.
6. Client agrees that no employee or officer of the client will have access to a cash box assigned to FP Associate, unless such access is available only in the presence of a FP Associate at all times.
7. Client agrees to review and approve FP Associate's transactions over \$500.00 throughout the day.
8. Client agrees to audit FP associate at the end of each assignment. Client will use dual control when dealing with FP Associate's teller box.
9. Client acknowledges that FP has warranted that on the condition that the above-stated "notification of loss" requirements are met, FP shall be responsible for any shortage in excess of twenty-five (\$25.00) Dollars that a FP Associate incurs with the exception of loss due to circumstances beyond our control, such as robbery, forgery, counterfeit and stop payment.
10. All shortages will be offset by all reported overages.

Bank: \_\_\_\_\_

Approved: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Employee Signature: \_\_\_\_\_



4100 Spring Valley Road  
 Suite 250  
 Dallas, TX 75244  
 972-991-8999  
 972-702-0776 Fax

NAME \_\_\_\_\_

CLIENT \_\_\_\_\_

WEEK ENDING \_\_\_\_\_

Teller policies and procedures reviewed.

Employee \_\_\_\_\_

Client \_\_\_\_\_

**TELLER DIFFERENCES**

	Supervisor Initials	Over	Short
MON	_____	_____	_____
TUE	_____	_____	_____
WED	_____	_____	_____
THU	_____	_____	_____
FRI	_____	_____	_____
SAT	_____	_____	_____

**Copy Distribution:**

- White Copy - Client
- Yellow Copy - Fax to Office with time sheet and keep original for your records