DAILY TIP REPORT

Name:	Date:			
Department:	☐ TOG (Including Cart)	\square The Inn Dining	☐ McKee's Tavern	
	☐ Catering Event ☐ C	Golf Hotel	☐ Sales Staff	
My own cash t	CASE os (includes amount you a Cash Tips Paid to Myse tip amount I'm claiming: s Paid Cash Tips	elf and Other Emp	loyees ur responsibility to put this estaurant manager daily	Sum of All Staff Amounts Must Equal Total
A/R Tips: Credit Card Ti Total Charged Char My own charge	CHARGED (CRE	\$\$ \$ Myself and Other	<u>Employees</u>	Sum of All Staff Amounts Must Equal Total