



BECKMAN ASB ITEM SALES WORKSHEET

Date: _____ **Organization & Event:** _____

| Description Of Item | Starting Quantity | Ending Quantity | Number Sold | Price Each | Total Value |
|---------------------|-------------------|-----------------|-------------|------------|-------------|
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TOTAL VALUE : _____

Comments: _____

Total Cash: _____

Deduct Starting Cash: _____

TOTAL NET CASH : _____

Over/Short _____ Seller(s) _____

Counted by _____

must be counted by 2 people