

Sales Tally Sheet

Group: _____ Event: _____ Date: _____

Item	Tally Sold	Price	Sub Total Sales (Price x Tally)
	Total Sold: _____		
	Total Sold: _____		
	Total Sold: _____		
	Total Sold: _____		
	Total Sold: _____		
	Total Sold: _____		
	Total Sold: _____		
	Total Sold: _____		
	Total Sold: _____		
	Total Sold: _____		
		Total Sales:	
		Total Cash:	
		Difference:	

Cashier: _____

Advisor/Coach: _____

Attach this completed form to the deposit form before placing in drop safe or with controller in person.