

Sales Report

Book Fair Dates _____

Prepared By _____

School Name _____

Address _____

City _____ State _____ Zip _____

E-Mail _____

	Checks	Currency	Coin	Deposit Total	Credit Cards*	Daily Total
DAY 1						
Deposit made by:						
DAY 2						
Deposit made by:						
DAY 3						
Deposit made by:						
DAY 4						
Deposit made by:						
DAY 5						
Deposit made by:						
DAY 6						
Deposit made by:						
Book Fair Totals						

Total the figures based on this report and transfer the dollar amount to the Financial Form.

*Do not deposit daily. Remit to Scholastic Book Fairs.

Chairperson Signature _____

Attach Deposit Slips Here

