

# Bookstore Daily Sales Audit Form

Date

Auditor Name

Store/Branch

## Sales Summary

Item Category	Opening Stock	Units Sold	Closing Stock	Unit Price	Total Sales
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Sales Amount:					<input type="text"/>

Cash Received

Card Payments

Digital/E-Payments

Discrepancy/Remarks

Auditor Signature  Signature

Manager Signature  Signature