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| BLUE RIDGE MOUNTAINS CHRISTIAN WRITERS CONFERENCE - BOOK INVENTORY |
| May 19 - 23, 2019 |
| Name:  |
| Address: |
| Cell Phone #: |

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| --- | --- | --- | --- | --- | --- | --- |
| Opening Quantity | Book or Other Product Name | Price | Quantity Verified | Quantity Not Sold | Quantity Sold | Total Sold Value |
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|  |  |  |  |  |  |  |
| Total Sold |  |
| **Less 20%** |  |
| **Balance Due** |  |

Please indicate whose name should appear on the check for the book sales

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand you will sell my books/products, keep a 20% service fee, and pay me for the balance. I further understand that I must check my books/products in and out with bookstore personnel.

Number of books/products in Opening Quantity Column is correct. Author \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Book Store Attendant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of books/products in Quantity Not Sold Column is correct. Author \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Book Store Attendant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_