

BOOTH SALE WORK SHEET

Troop Cookie Activity Manager's Signature _____ Phone _____

Booth Location:	Date: Time:
Girl's Names:	Signature of Attending Adult:

	(Column 1) Packages started with	(Column 2) Packages ended with	Packages sold (Column 1 - Column 2)
Lemon Chalet Crèmes			
Trefoils			
Do-Si-Dos			
Samoas			
Dulce De Leche			
Thank U Berry Munch			
Tagalongs			
Thin Mints			
TOTALS	(1)	(2)	(3)

Final Accounting:

Total packages started with (1)	
- Total packages ended with (2)	
= Total packages sold (3)	
X \$4.00	
+ Cash started with	
+ Voluntary Donations: Gift of Caring	
+ Voluntary Donations: Donation to Troop	
= Total money due	
Verified by (TCSM Signature):	
Attending Adult Signature:	

At the end of all cookie booths, all cookies and money **MUST** be returned to the Troop Cookie Activity Manager.

