2024 Cookie Boothing Form

Troop #: _____   Cookie / Booth Chair Name: _____

Date: _____   Chair Phone Number: _____

Booth Location / Time Period: _____   Adult(s) at Site: _____

	C4C	ADVF	LU	TRE	DSD	SAM	TAG	TM	S'M	TT	Total
A. Starting # of Pkgs											
B. # of Pkgs Sold											
C. Ending # of Pkgs											
D. List of Credit Cards (enter $ of each sale)											Total

Balancing Money	$1	$5	$10	$20	$50	$100	Coin	Checks	Total		
E. Cash On Hand											
F. Less: Beginning Cash											
G. Amount to Deposit											

Total Sales at this Booth (Total B *$6) _____

Less: Cash/Checks deposited/CC Processed (Total G) _____

Reconciliation – Difference Should Be ZERO

Girl Scouts / Pkg Allocation Worksheet

Girl Scouts Boothed	Start Time	End Time	Hrs Worked	Pkgs Allocated	C4C Allocated
		Total Allocated			
		Left to Allocate			

Entered into eBudde | Yes | No

Notes

2024 Cookie Boothing Form

Troop #: _____

Date: _____

Booth Location / Time Period: _____

Cookie / Booth Chair Name: _____

Chair Phone Number: _____

Parent(s) at Site: _____

	C4C	ADVF	LU	TRE	DSD	SAM	TAG	TM	S'M	TT	Total
Use this area for tallying your packages sold during the Booth											
Total Pkgs Sold (Balance to Rows D&E)											

Revised 10/25/23