

Cookie Booth Sales Credit Worksheet

T-4

Troop # _____ Booth Location _____
 Date _____ Start Time _____ End Time _____
 Weather _____

	Name	Phone Number
Troop Leader	_____	_____
Troop Cookie Program Manager	_____	_____
Service Unit Cookie Program Manager	_____	_____

# Hours	Name of Girls Working Booth	Total Hours Worked by Girls

Cookies	Beginning Number of Boxes	Ending Number of Boxes	Total Boxes Sold
Total Boxes			
		\$ per Box	X \$ 3.50
		Total Sale	\$

Start Up Money	\$ _____
Donations	\$ _____
Cookies from Home	\$ _____
Check Amounts	\$ _____
Cash	\$ _____
Total	\$ _____*

*** Note: If money order is purchased, deduct price from total and attach the money order and receipt to this form.**

We accept pre-printed checks with pre-printed name, address and telephone number made out to Girl Scouts Of West Central Florida for a minimum of \$10 up to a maximum of \$150. All checks returned NSF will be electronically debited for the face value plus a returned processing fee as allowed by state law.