

2025 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 (\$6)											
C. # of Pkgs Sold (\$7)											
D. Ending # of Pkgs (A - (B+C))											
E. Total of Credit Card Payments Received											
F. Total of Paypal/Venmo Payments Received											
Balancing Money	\$1	\$5	\$10	\$20	\$50	\$100	Coin	Checks			Total
G. Cash On Hand											
H. Less: Beginning Cash											
I. Amount to Deposit											

Total Sales at this Booth ((Total B *\$6) + (Total C * \$7)) _____

Less: Cash/Checks deposited + CC/Other Pmts Processed/ (Total I) _____

Reconciliation - Difference Should Be ZERO

Girl Scouts / Pkg Allocation Worksheet

Girl Scouts Boothed	Start Time	End Time	Hrs Worked	Pkgs Assigned	C4C Assigned
			Total Assigned		
			Left to Assign		

Entered into eBudde

Yes

No

Notes

2025 Cookie Boothing Form

Troop #: _____

Cookie / Booth Chair Name: _____

Date: _____

Chair Phone Number: _____

Booth Location / Time Period: _____

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 B&C)											