

2015 Cookie Boothing Tally Sheet

Troop # _____

Cookie / Booth Chair Name: _____

Date: _____

Chair Phone Number: _____

Booth Location/Time Period: _____

Parent(s) at Site: _____

	GOC	Sav Smiles	Trefoils	Do-Si-Dos	Samoas	Rah Rah	Tagalongs	Thin Mints	Toffee	Total
Use this area for tallying your boxes sold during the Booth										
Total Boxes Sold (Balance to Row D)										