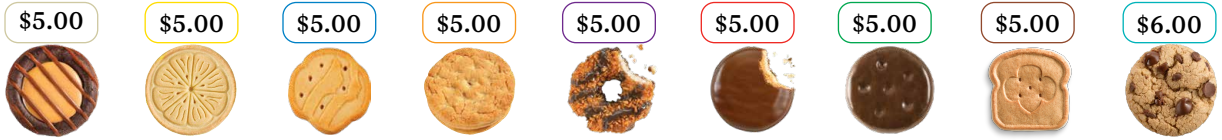


Booth Inventory Sheet

Booth Location: _____

Date & Time: _____

Troop #: _____



	Adventurefuls	Lemonades	Trefoils	PB Sandwich	Caramel deLites	PB Patties	Thin Mints	Toast-Yays!	GF Caramel Chocolate Chip
Starting Inventory									
Packages Sold (Use Tally Marks)									
Donations (Use Tally Marks)									
Ending Inventory									
Total Packages Sold									

Girl Scout On Duty	Date	Start Time	End Time

Adult Supervisors

Ending Cash		
Starting Cash	-	
Total Cash Collected	=	

Notes: _____

Adult Signature: _____