

TROOP # _____
LEVEL - D B J C S A
(CIRCLE ONE)

NAME _____
ADDRESS _____

PHONE _____

GIRLS REGISTERED _____
GIRLS SELLING _____

DATE	NAME	ISSUED										SOLD										\$ DUE	\$ PAID		
		ADVENTUREFULS	TOAST-YAYS	LEMONADES	TREFOILS	THIN MINT	PEANUT BUTTER PATTIES	CARAMEL deLITES	PEANUT BUTTER SANDWICH	GLUTEN FREE	COOKIE SHARE	TOTAL	ADVENTUREFULS	TOAST-YAYS	LEMONADES	TREFOILS	THIN MINT	PEANUT BUTTER PATTIES	CARAMEL deLITES	PEANUT BUTTER SANDWICH	GLUTEN FREE			COOKIE SHARE	TOTAL
1	ORIGINAL ORDER																								
	TOTAL																								
2	ORIGINAL ORDER																								
	TOTAL																								
3	ORIGINAL ORDER																								
	TOTAL																								
4	ORIGINAL ORDER																								
	TOTAL																								
5	ORIGINAL ORDER																								
	TOTAL																								
6	ORIGINAL ORDER																								
	TOTAL																								
7	ORIGINAL ORDER																								
	TOTAL																								
8	ORIGINAL ORDER																								
	TOTAL																								

DATE	NAME	ISSUED										SOLD										\$ DUE	\$ PAID		
		ADVENTUREFULS	TOAST-YAYS	LEMONADES	TREFOILS	THIN MINT	PEANUT BUTTER PATTIES	CARAMEL deLITES	PEANUT BUTTER SANDWICH	GLUTEN FREE	COOKIE SHARE	TOTAL	ADVENTUREFULS	TOAST-YAYS	LEMONADES	TREFOILS	THIN MINT	PEANUT BUTTER PATTIES	CARAMEL deLITES	PEANUT BUTTER SANDWICH	GLUTEN FREE			COOKIE SHARE	TOTAL
9	ORIGINAL ORDER																								
	TOTAL																								
	ORIGINAL ORDER																								
TOTAL																									
11	ORIGINAL ORDER																								
	TOTAL																								
	ORIGINAL ORDER																								
TOTAL																									
13	ORIGINAL ORDER																								
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	ORIGINAL ORDER																								
TOTAL																									
15	ORIGINAL ORDER																								
	TOTAL																								
	ORIGINAL ORDER																								
TOTAL																									