

Date: _____

Time: _____

Location: _____

Scout: _____

	Beginning Inventory	Ending Inventory	# Sold / \$ Sold
Popping Corn			
White Cheddar Popcorn			
Sweet & Salty Kettle Corn			
Salted Caramel Corn			
Microwave Butter Popcorn			

Total Popcorn Sales: \$_____

Beginning Cash on Hand: \$_____

Cash Converted to Card (end of shift): \$_____

Ending Cash on Hand: \$_____