

Date: _____

My Girl Scout's Cookie Order

Girl Scout Name:			Girl Scout Parent/	Caregiver:			
first and last				first and last			
	Cookies needed, in PACKAGES:						
	From Paper Order Card	+	From Girl Delivery Orders in DC24	+	Direct Ship Orders in DC24 Do Not Report		TOTAL PKGS
Cookie Share*: *You must collect \$6 per s	share. Cookies will be do	onated to the	USO, Harvesters, and Con	ivoy of Hope.	XXXXXXXX		
Adventurefuls		+		+	<u>xxxxxxxx</u>	=	
Toast-Yay!		+		+	<u>XXXXXXXX</u>	=	
Lemonades		+		+	<u>xxxxxxxx</u>	=	
Trefoils		+		+	<u>xxxxxxxx</u>	=	
Thin Mints		+		+	<u>XXXXXXXX</u>	=	
PB Patties		+		+	<u>XXXXXXXX</u>	=	
Caramel deLites		+		+	<u>xxxxxxxx</u>	=	
PB Sandwiches		+		+	<u>xxxxxxxx</u>	=	
Caramel Choc Chip Caramel Chocolate Chip i	s not available from all i	+ troops; please	e confirm your troop is sel	+ ling this varie	<u>XXXXXXXXX</u> ty.	=	

For Troop Use Only:

O Cookies ordered in Smart Cookies

 ${\bf O}$ Cookies picked up

O Receipt issued

Notes: _____