

# Three Harbors Council Spring 2020 Popcorn Return Form



	<b>SHOW AND SELL RETURNS</b>	
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Date:  District:  Name:

Unit:  Unit #:  Phone #: (  )

Return Location:  Milwaukee Service Center  Camp Oh-da-ko-ta

ORDERS	POPCORN
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<b>White Popping Corn</b> Cases      Containers <input type="text"/> <input type="text"/>	<b>Classic Caramel</b> Cases      Containers <input type="text"/> <input type="text"/>	<b>Snakebite Supremo</b> Cases      Containers <input type="text"/> <input type="text"/>
<b>Campfire Conniption</b> Cases      Containers <input type="text"/> <input type="text"/>	<b>Cheddar Cheese</b> Cases      Containers <input type="text"/> <input type="text"/>	<b>Jalepeno Cheese</b> Cases      Containers <input type="text"/> <input type="text"/>
<b>Butter Microwave</b> Cases      Containers <input type="text"/> <input type="text"/>	<b>Kettle Microwave</b> Cases      Containers <input type="text"/> <input type="text"/>	<b>Sea Salt Light Microwave</b> Cases      Containers <input type="text"/> <input type="text"/>
<b>Peanut Butter Cup</b> Cases      Containers <input type="text"/> <input type="text"/>	<b>Trail Mix</b> Cases      Containers <input type="text"/> <input type="text"/>	<b>Caramel w/ Sea Salt Brewers</b> Cases      Containers <input type="text"/> <input type="text"/>
<b>Caramel w/Sea Salt-Cubs</b> Cases      Containers <input type="text"/> <input type="text"/>	<b>Classic Trio</b> Cases      Containers <input type="text"/> <input type="text"/>	<b>Double Butter</b> Cases      Containers <input type="text"/> <input type="text"/>
<b>Cheese Lovers</b> Cases      Containers <input type="text"/> <input type="text"/>		

Product	# Case
White Popping Corn	8 items/case
Classic Caramel	8 items/case
Snakebite Supremo	8 items/case
Campfire Conniption	8 items/case
Cheddar Cheese	8 items/case
Jalepeno Cheese	8 items/case
Butter	8 items/case
Kettle	8 items/case
Sea Salt Light	8 items/case
Peanut Butter Cup	8 items/case
Trail Mix	8 items/case
Caramel Sea Salt/Team	8 items/case
Classic Trio	1 item/case
Double Butter	1 item/case
Cheese Lovers	1 item/case

ACCOUNTING
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Due Council:  Paid Y/N:

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Date Entered into PRP:  By:

**Damaged Items Unable to Return:**

BUSINESS
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Unit Representative:  Council Popcorn Representative:  Date:

Print: <input style="width: 90%; height: 20px;" type="text"/>	Print: <input style="width: 90%; height: 20px;" type="text"/>	
Sign: <input style="width: 90%; height: 20px;" type="text"/>	Sign: <input style="width: 90%; height: 20px;" type="text"/>	

**Notes:**