

1st Class Requirement 4b

Date: _____

Food Shopping List

Event: _____

Number in Patrol: _____

Shopper: _____

Total Budget: _____

<u>Item:</u>	<u>Cost:</u>
1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____
8	_____
9	_____
10	_____
11	_____
12	_____
13	_____
14	_____
15	_____
16	_____
17	_____
18	_____
19	_____
20	_____
21	_____
22	_____
23	_____
24	_____
25	_____
26	_____
27	_____
28	_____
29	_____
30	_____

<u>Item:</u>	<u>Cost:</u>
31	_____
32	_____
33	_____
34	_____
35	_____
36	_____
37	_____
38	_____
39	_____
40	_____
41	_____
42	_____
43	_____
44	_____
45	_____
46	_____
47	_____
48	_____
49	_____
50	_____
51	_____
52	_____
53	_____
54	_____
55	_____
56	_____
57	_____
58	_____
59	_____
60	_____

Sub. Total: _____

Sub. Total: _____

Grand Total: _____

