



UNIT PRODUCT TRANSFER FORM

2017 Michigan Crossroads Council Popcorn Sale

Units may utilize this form to transfer product with each other rather than returning/ordering the product through council. Upon receipt of the properly completed form, the council will process the transfer between units in the popcorn system. Please give us several business days, then confirm the transfer in the Trails-End system.

Click on the "Order" tab, then "View Order Adjustment Details."

If both units are receiving popcorn, two forms must be completed.

TRANSFER PRODUCT FROM (Selling Unit):

FSC: _____ District: _____ Unit Type: _____ Unit Number: _____

TRANSFER PRODUCT TO (Purchasing Unit):

FSC: _____ District: _____ Unit Type: _____ Unit Number: _____

Forms must be received by MCC no later than **October 28, 2017**.

Email to: mccpopcorn@scouting.org
 Subject: Product Transfer
 CC: Purchasing Unit

Office Use: Entered: ____/____/2017

Staff member: _____

PRODUCT INFORMATION			PICKUPS		RETURNS	Retail Cost		Total Cost
ICON	case:pc	Product	# OF FULL CASES	# OF CNTRS	# OF FULL CASES ONLY	CASE	CNTR	
		Gold Military Donation (Magnet)					\$50	
		Silver Military Donation (Magnet)					\$30	
	1:1	Chocolate Lover's Collection (Tin)					\$60	
	1:1	Cheese Lover's Collection (Box)					\$30	
	1:6	Salted Caramel (Tin)				\$180	\$30	
	1:12	Chocolatey Caramel Crunch (Bag)				\$300	\$25	
	1:12	Premium Caramel Corn (Bag)				\$240	\$20	
	1:6	Unbelievable Butter (Box)				\$120	\$20	
	1:12	White Cheddar (Bag)				\$180	\$15	
	1:12	Classic Carmel Corn (Bag)				\$120	\$10	
	1:12	Popping Corn (Bag)				\$120	\$10	
TOTALS								

The undersigned authorize this transfer of product from selling unit to purchasing unit. The selling unit leader agrees to send this completed form to Michigan Crossroads Council for processing no later than October 28, 2016. The purchasing unit leader agrees they are accepting financial responsibility for the product being transferred.

Date: _____

Selling Name: _____

Purchasing Unit Leader Name: _____

Selling Unit Leader Signature: _____

Purchasing Unit Leader Signature: _____

Phone: _____

Phone: _____