girl scouts of middle tennessee

OUTSTANDING DEBT REPORT
GIRL DEBT

Troop Number _____ Service Unit Name/Number _____

Please print.

Important: Council will only start the collection process if the signed Parent Permission Slip, receipts, and email/text conversations are attached.

Troop Cookie Program Manager _____ Telephone _____ Email _____

Troop Leader _____ Telephone _____ Email _____

Person completing form _____ Position _____ Telephone _____

Responsible Party's Information

Responsible Party (Parent/Guardian. Important: Attach signed permission slip) _____

Girl Scout's full name _____

Responsible Party's address _____ City _____ Zip _____

Home Telephone _____ Cell _____ Email _____

Amount Due to Council:

(_____ × $3.50) + (_____ × $5.00) = _____

No. of boxes received | Price per box | No. of Toffee=tastic & Girl Scout S'mores packages received | Price per box | Total Amount Due

_____ - _____ = _____

Total Amount Due | Amount paid (attach receipts) | Amount due to Council

Record of Collection Attempts

Please be specific. If you need additional space, please use the back of this form.

Dates of Contact	Notes