girl scouts of eastern missouri

TROOP FINANCIAL REPORT & REQUEST TO CARRY OVER FUNDS

Due to Neighborhood Treasurer no later than June 30, 2013.

Troop Leader's Name _____

Address _____ City, State, Zip _____

Day Phone _____ Evening Phone _____ Email _____

Age Level (Please circle): D: grades K-1; B: grades 2-3; J; grades 4-5; C: grades 6/8; S: grades 9-10; A: grades 11-12

Troop # _____ District/Neighborhood _____ # of Girls beginning year _____ # of Girls end of year _____

Dues charged per week/month $_____ Starting _____ Ending _____

INCOME		**EXPENSES**	
Balance from previous year	_____	Registration paid	_____
Registration collected	_____	Money-Earning costs	_____
Troop Dues	_____	Troop Supplies	_____
Fall Product Proceeds	_____	Service Projects	_____
Cookie Program Proceeds	_____	Camping/Cookouts	_____
Badges, patches, pins, etc.	_____	Troop Trips	_____
Troop Trips	_____	Activity, Event fees	_____
Activity/Event fees	_____	Badges, patches, pins, etc.	_____
Money-Earning Events	_____	Other (specify)	_____
Camping	_____	_____	_____
Donations	_____	_____	_____
Other (specify)	_____	_____	_____
TOTAL INCOME	_____	**TOTAL EXPENSES**	_____

Net Troop Bank Account Balance as of May 31: (income - expenses = net balance) $_____

Name/address of bank with troop account: _____

Account # _____ Checking _____ Savings _____

Please attach copies of the Troop's Bank Statements for the past 12 months and submit to your Neighborhood Treasurer no later than June 30,2013.

Date _____ Authorized Check Signers 1._____

2._____

3._____

Troop funds should be used by girls who participated during the year. If there is a balance, please indicate future use. If accumulated troop funds are being transferred to another troop, group, level, or carried over, fill in the following section and obtain Neighborhood Manager approval. Estimated number of girls continuing in the fall: _____ Have parents been informed of the need to carry over troop funds and received a Troop Treasury Report? Yes _____ No _____ If no, when will parent meeting take place? _____ Amount requested to carry over: $_____ Plans for use of money: _____

Estimated cost of plans: $_____ Have girls been included in the decision making process? Yes _____ No _____

How? _____

_____

Comments: _____

Neighborhood Treasurer Signature _____ Date _____

Leader's Signature_____ Date _____

White: Council Officer
Pink: Neighborhood Treasurer
Yellow: Retained by the Troop Leader with a copy of the Troop's Bank Statements for the past 12 months.

P-21
KD/mff
3/11/2013