

Outstanding Girl Debt Report

Please print.

Troop Number

Service Unit Name & Number

Important: Council will only start the collections process if the signed Parent Permission Slip is attached. If the form is not attached, the debt becomes the responsibility of the troop cookie program coordinator.

Troop Cookie Program Coordinator

Phone Number

Email

Troop Leader

Phone Number

Email

Person completing form

Position

Phone Number

Responsible Party's Information

Responsible Party
(Parent/Caregiver
Important: Attach signed permission slip)

Girl Scout's Full Name

Responsible Party's Address

City

Zip

Home Telephone

Cell

Email

Amount Due to Council:

	X	\$5.00	=	
No. of packages received		Price per package		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.

Date of Contact	Notes