

 PARENT

# GIRL SCOUTS HEART OF THE SOUTH 2021 FALL PRODUCT OUTSTANDING BALANCE

 TROOP

Fill out an Outstanding Balance form for each person who owes money for nut and candy orders at the end of the program. Forms are to be submitted through the ACH Shortage Form. The quicker we can begin the collection process the better our chances of receiving payment. No Outstanding Balance Forms will be accepted by the council after December 8, 2021. After this date the troop is responsible for payment of the outstanding debt.

SERVICE UNIT: \_\_\_\_\_ AGE LEVEL: \_\_\_\_\_ TROOP #: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_ DAUGHTER(S): \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ HOME PHONE: (    ) \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ WORK PHONE: (    ) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ CELL PHONE: (    ) \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_ DRIVER'S LICENSE #: \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_ PARENT PERMISSION FORM ATTACHED? YES NO

TROOP FALL PRODUCT MANAGER: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ HOME PHONE: (    ) \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ WORK PHONE: (    ) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ CELL PHONE: (    ) \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_ TROOP MANAGER AGREEMENT ATTACHED? YES NO

TROOP LEADER (if different from TFPM): \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ HOME PHONE: (    ) \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ WORK PHONE: (    ) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ CELL PHONE: (    ) \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_ TROOP MANAGER AGREEMENT ATTACHED? YES NO

PARENT UNPAID FUNDS	
TOTAL MONEY DUE TO TROOP	\$ _____
MINUS - PAID ONLINE	\$ _____
MINUS - PAID TO TROOP	\$ _____
REMAINING BALANCE DUE	\$ _____

TROOP UNPAID FUNDS	
TOTAL TROOP SALES	\$ _____
MINUS - TROOP PROCEEDS	\$ _____
MINUS - ONLINE PAYMENTS	\$ _____
MINUS - PAID TO COUNCIL	\$ _____
MINUS - PARENT UNPAID FUNDS	\$ _____
REMAINING BALANCE DUE	\$ _____

RECEIPTS ATTACHED: YES NO

WE MUST HAVE PROPER DOCUMENTATION TO PURSUE COLLECTION OF OUTSTANDING BALANCES. LIST DATES AND RESULTS OF ALL ATTEMPTS TO COLLECT ANY BALANCES OWED BELOW:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOR COUNCIL USE ONLY**

ORIGINAL BALANCE	AMOUNT PAID	CURRENT DUE	DATE	STAFF	NOTES