

This form is to be completed annually by all troops and service units who have (or who are establishing) a troop/service unit bank account.

This form should also be filed with the council, no later than two weeks after opening a new account. Additionally, if the location of the account or the signatories should change, a new form should be filed within two weeks of any change. Any troop/service unit with \$100 or more in its treasury is **required** to deposit the funds into a troop/service unit account in an accredited financial institution.

Account Type: Service Unit Bank Account Troop Bank Account

Troop(s) _____ of SU# _____ Service Unit _____ acknowledges and agrees to:
***List ALL troops associated with this account.**

- Have an active GSHS troop/service unit bank account.
- Deposit funds collected **frequently** into the troop account.
 - The funds will cover what is due to the council.
 - Total sales less troop proceeds and less any shortage information submitted by deadline.
- Allow GSHS to **deposit** and/or **sweep** funds from the troop/service unit bank account, according to established timelines and/or with prior consent.
- Communicate and submit shortage of required funds to info@girlscoutshs.org by the deadlines outlined in Product Program guides.
- Be responsible for any non-sufficient funds (NSF) charges that occur when a bank sweep is rejected.
- Authorize GSHS to repeat deposits/sweeps that fail for any reason or if a balance remains.

List all signees with the ability to sign checks or withdraw funds from this account:

Spender: _____ Record Keeper: _____

Other: _____ Other: _____

ATTACH COPY OF CHECK HERE

***Must include bank name, account and routing information.
Do not copy information from your check.***

IF NO CHECKS:

Attach a letter from the bank that verifies both routing and account numbers.

I certify that I am a signer on the account designated and am entitled to provide the above information.

Signature: _____

ELECTRONIC SIGNATURE NOT ACCEPTED

Troop #(s): _____

Print Name: _____

Service Unit: _____

Street Address: _____

Home Phone: () _____

City: _____ State: _____ Zip: _____

Work Phone: () _____

Email Address: _____

Cell Phone: () _____

Type of bank account: Checking Savings Other _____

The signature above also serves as an authorization for the bank to release account information and the balance of this account to Girl Scouts Heart of the South. For additional support in establishing a troop/SU bank account and/or financial management support, please contact us at 800-624-4185.

Submit form to info@girlscoutshs.org or to your local service center.