

Girl Scouts Heart of the Hudson, Inc.

JULIETTE CUSTODIAL FUND REQUEST FORM

Submit this form to the Product Sales Manager at the regional office serving your Community.

See our website: www.girlscoutshh.org for addresses.

Questions? Call your local Product Sales Manager

Date Submitted: _____

Amount Requested: \$ _____

Source of Funds: Cookies \$ _____

Nuts/Magazines \$ _____

For approval to access funds:

Complete this form and submit to Girl Scouts Heart of the Hudson, Inc.

Please allow at least 4 – 6 weeks for processing.

Attach copies of pertinent documentation as indicated below.

Name: _____ Phone: _____

Address: _____ City _____ ST__ Zip _____

Parent/Guardian Email address: _____

Requesting funds for the following:

*Note: Proper documentation is needed in order to process any requests:

- Non-Council Sponsored Girl Scout Program (attach registration form, receipts, etc.)
- Council sponsored event or trip (attach program registration form for internal transfers).
- Community sponsored event or trip (attach Community Flyer or description).
- Leadership Opportunities Bronze/Silver/Gold Award Community Service
Please describe _____

Council shop (attach receipt's or shopping list)

Other (i.e., other Council's programs, adult chaperone fee, etc.) (please specify)

Please check:

- I am attaching my receipts for reimbursement.
- I am requesting a cash advance check and will follow up with receipts within five business days following the activity.
- I am requesting funds for an internal transfer.

Supervising staff must approve all applications and the Product Sales Manager must verify all funds before release of product program funds.

Juliette Girl Scout's Signature Date

Parent/Guardian Signature

Field Mgr. or Program Mgr. Signature Date

Product Sales Manager Signature Date

This form is to be used by any Juliette Girl Scout who has participated in the Fall Product Program and/or Girl Scout Cookie Program and whose profits are being held by the Girl Scout Council. These funds must be used within 3 from date of receipt.

For office use only: membership registration okay Check Requisition Issued _____
Date