

Service Unit Finance Report

Do not e-mail or fax this form. It includes sensitive personal information.

Service Unit Name or # _____	Number of Troops/Groups _____
Service Unit Treasurer _____	Service Unit Director or Leader Support Manager _____

For the year ending August 31 _____. Due by September 30 of each year. Submit this form with a copy of the last bank statement to the council support staff for your area. This form covers September 1 through August 31. Please keep a copy for your records. If your service unit has more than one account, please submit a separate form for each account.

Name of Financial Institution _____
Account # _____
Branch Telephone # _____
Account type: Checking Savings Both
Names of Authorized Signers: _____
Signer #1 _____
Signer #2 _____
Signer #3 _____
Please include additional accounts on a separate form.

Record of All Donations Received (Monetary & In-Kind)
Indicate the value of all donations the service unit has received in the name of Girl Scouting. Please attach completed sponsorship form for each donor. If you have additional donations, attach a separate piece of paper.

Cash	\$ _____
Supplies	\$ _____
Equipment	\$ _____
Meeting Space	\$ _____
Other (please specify)	\$ _____
Total Value of Donations	\$ _____

Financial Plans
If the service unit's ending balance is more than \$1,000 what are the plans for the use of these funds?

We certify that the above is an accurate statement of income and expenses for the year.

Print Service Unit Director or Leader Support Manager Name _____	
Signature _____	Date _____
Print Service Unit Treasurer Name _____	
Signature _____	Date _____

Service Unit Income/Expense Statement	
A—Ending Balance from prior year	\$ _____
Current Year Income (September 1 through August 31)	
Cash Donations/Community Contributions	\$ _____
Fees Collected for Events/Activities	\$ _____
Other Money-Earning Activities	_____ \$ _____
_____	\$ _____
_____	\$ _____
Cookie Sale Bonus	\$ _____
Fall Sale Bonus	\$ _____
Cookie Credit Reimbursement	\$ _____
Miscellaneous Income (Specify)	_____ \$ _____
B—Total Income	\$ _____
C—Grand Total (A + B)	\$ _____
Expenses (September 1 through August 31)	
Postage and Mailings	\$ _____
Copy/Printing Costs	\$ _____
Program and Training Supplies	\$ _____
Site Rental/Maintenance Costs	\$ _____
Equipment Purchases/Maintenance	\$ _____
Service Projects	\$ _____
Awards and Recognitions	\$ _____
Donations	\$ _____
Insurance	\$ _____
<i>destinations</i>	\$ _____
Recruitment	\$ _____
Other Miscellaneous Expenses (Specify)	_____ \$ _____
_____	\$ _____
_____	\$ _____
D—Total Expenses	\$ _____
E—Ending Balance (C—D = E)	\$ _____
Reconciliation of Funds/Account	
Total Balance on Last Bank Statement	\$ _____
Total Outstanding Deposits	+ _____
Total Outstanding Checks	- _____
Total Cash Held (Petty Cash)	+ _____
Grand Total (should equal line "E")	\$ _____