

irl scouts of northern california Service Unit Finance Report Do not e-mail or fax this form. It includes sensitive personal information.

or mortificant camernia			
Service Unit Name or #	Number of T	roops/Groups	
Service of the Marrie of #	Number of 1	100p3/010up3	
Service Unit Treasurer		Director or Leader Support Manager	
	n covers Septembe	each year. Submit this form with a copy of the last b or 1 through August 31. Please keep a copy for your re form for each account.	
·		Service Unit Income/Expense Stat	ement
Name of Financial Institution		A—Ending Balance from prior year	\$
		Current Year Income (September 1 through Augu	ıst 31)
Account #		Cash Donations/Community Contributions	\$
Branch Telephone #		Fees Collected for Events/Activities	\$
	oth	Other Money-Earning Activities	
	J(11		\$
Names of Authorized Signers:			\$
Signer #1			\$
Signer #1		Cookie Sale Bonus	
0.4		Fall Sale Bonus	\$
Signer #2		Cookie Credit Reimbursement	\$
Sidner #2		Miscellaneous Income (Specify)	
Signer #3			\$
Please include additional accounts on a separate		B—Total Income	\$
Record of All Donations Received (Monetary & Indicate the value of all donations the service ur		C—Grand Total (A + B)	\$
the name of Girl Scouting. Please attach comple		Expenses (September 1 through August 31)	
form for each donor. If you have additional dona		Postage and Mailings	\$
separate piece of paper.		Copy/Printing Costs	\$
Cash	\$	Program and Training Supplies	\$
Supplies	\$	Site Rental/Maintenance Costs	\$
Equipment	\$	Equipment Purchases/Maintenance	
Meeting Space	\$	Service Projects	\$
Other (please specify)		Awards and Recognitions	\$
	\$	Donations	\$
Total Value of Donations	\$	Insurance	\$
Financial Plans		destinations	\$
If the service unit's ending balance is more than	\$1,000 what are	Recruitment	\$
the plans for the use of these funds?		Other Miscellaneous Expenses (Spec	eify)
			\$
			\$
We certify that the above is an accurate state and expenses for the year.	ment of income	D—Total Expenses	\$
and expenses for the year.		E—Ending Balance (C—D = E)	\$
Print Service Unit Director or Leader Support Ma	anager Name	Reconciliation of Funds/Account	
Thin service of it birector of Leader Support Ma	mager Name	Total Balance on Last Bank Statement	\$
	 Date	Total Outstanding Deposits	+
-	_ 3.00	Total Outstanding Checks	·
Print Service Unit Treasurer Name		Total Cash Held (Petty Cash)	
Signature	Date		+\$
5	Date	orana rotal (should equal line L)	¥

Service Unit Income/Expense Stat	ement
A—Ending Balance from prior year	\$
Current Year Income (September 1 through Augu	ıst 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)	
	\$
3—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	\$
destinations	\$
Recruitment	\$
Other Miscellaneous Expenses (Spec	ify)
	\$
	\$
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")	\$