



Product Program
Outstanding Money Report and Contact Record

Use this form for money owed for product sales. The troop should not pay any amount of the money that was NOT collected. Use only one form for each outstanding account.

Please refer to the current ACH schedule for this form's due date.

This form must be completed in its entirety and include the following documentation:

- 1. Parent/Guardian Permission & Responsibility Form
2. Any and all receipt documentation (M-3 receipts)

Send this completed form and all documentation to helpdesk@gshom.org.

Today's Date: \_\_\_/\_\_\_/\_\_\_ [ ] Treats & Reads Program [ ] Cookie Program

Troop Leader Information: (Please Print)

Troop #: \_\_\_\_\_ Service Unit #: \_\_\_\_\_ Regional Center: \_\_\_\_\_
Name: \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_ State: MI Zip code: \_\_\_\_\_
Phone (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Information about person owing money: [ ] Parent/Guardian [ ] Troop Leader [ ] Other Volunteer

Troop #: \_\_\_\_\_ Area#: \_\_\_\_\_ Girl Name: \_\_\_\_\_
Debtor Name: \_\_\_\_\_ Driver License: \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_ State: MI Zip code: \_\_\_\_\_
Phone (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Total number of items ordered: \_\_\_\_\_ packages
Total amount due to troop \$ \_\_\_\_\_
Amount already paid to troop \$ \_\_\_\_\_
Total amount to be collected by GSHOM \$ \_\_\_\_\_

Contact Log (please initial and date each time that you have made/attempted contact) Initial/Date

- 1. \_\_\_\_\_ / \_\_\_\_\_
2. \_\_\_\_\_ / \_\_\_\_\_
3. \_\_\_\_\_ / \_\_\_\_\_

