girl scouts of wisconsin southeast

2014 Fall Nut Sale
Outstanding Balance Form

(Complete one form for each outstanding balance)

This form is being submitted due to: ❒ Parent/Guardian outstanding balance ❒ Returned Check

Items Below Must Accompany this Form

❒ Signed Parent/Guardian Permission Slip

❒ Signed receipt for product received by Parent/Guardian

❒ Signed receipt for partial payment(s) made

In order for your troop's account to be debited the proper amount, this form must be submitted to a council service center **No later than Friday, December 12, 2014**. Please be sure the documents listed above are attached.

Troop # _____ Service Area Name/Number _____

Legal Name of Person with Outstanding Balance _____

First and Last Name of Child (If applicable) _____

Address _____ City _____,WI Zip _____

Email Address _____

Phone (Cell) _____ Phone (Home) _____

Troop Leader's Name _____ Phone _____

Returned Check: Attach a copy of the returned check and/or bank statement showing the returned check amount and any fees assessed. If this form is submitted before December 12, 2014, the troop's balance due on December 18, 2014 will be adjusted accordingly. If a troop receives a returned check after December 18, 2014, a credit will be issued via ACH.

Name of Troop's Bank	Troop Bank Account #	Returned Check # (if applicable)	Amount Due to Troop	Bank Fee
			$	$
			$	$

Please make **three** attempts to collect payment. Record your results below. Include the date and method of contact. (Example: "Called and spoke to _____ on 12/08/14. She will make a partial payment on 12/14/14.")

1. _____

2. _____

3. _____

For Internal Use Only: Date Received _____

Notes:

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