

Money-Earning Activity Financial Reporting Form (Post-Event) SU | Troop | IRM

Activity Name: _____

Event Date(s): _____

SU/Troop/IRM: _____

Contact Name: _____

Contact Email/Phone: _____

Mailing Address: _____

Financial Summary

\$ _____ Total Gross Revenue Raised

\$ _____ Total Event Expenses (if applicable)

\$ _____ Net Proceeds Raised

Date Funds Were Transmitted to GSCCC: _____

Include a copy of this completed form with your transmittal.

Donor Recognition

Please indicate any individuals, companies, service organizations, etc. who provided you with donated items or cash donations. GSCCC is the IRS qualified nonprofit organization #54-1158412 and is the entity that must issue the charitable receipt. (copy as many times as needed)

Name _____ Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

What was donated? _____

Donor assigned value \$ _____ (in-kind item)

Financial Donation \$ _____ (cash/check)

Number of Girl Scout Participants: _____

Brief Outcome Summary of Girl Scout(s) Engagement:

Certification

I certify that the financial information reported above is accurate and that all funds raised and transmitted have been reported in accordance with GSCCC policies and procedures.

Submitted by: _____

Position/Role: _____

Signature: _____

Date: _____

Please allow two weeks for verification, processing, and mailing.

Submit questions to customercare@gscccc.org.