

## TROOP | SERVICE UNIT DONATION REPORT

Donor Name: \_\_\_\_\_ Date of Gift: \_\_\_\_\_

If Donor is a Company, Contact Name: \_\_\_\_\_

Donor Address: \_\_\_\_\_

Donor Phone Number: \_\_\_\_\_ Donor E-Mail: \_\_\_\_\_

Donor Website: \_\_\_\_\_

Donor Type: ☐ Individual ☐ Corporation/Civic Group ☐ Money Earning Proceeds

This is a gift of: ☐ Cash ☐ Check #: \_\_\_\_\_ ☐ Gift Card

☐ Goods/Services ☐ Use of Facilities

How will the funds be used?

\_\_\_\_\_

\_\_\_\_\_

Description of Money Earning or Gift: (What is it? i.e. Art supplies, gardening supplies, etc.)

\_\_\_\_\_

Total funds enclosed: \$ \_\_\_\_\_

If in-kind, total value reported by donor \$ \_\_\_\_\_ Please attach receipt or donor communication

Activity Budget Report (if applicable):

\$ \_\_\_\_\_ Amount allocated from troop | SU funds (Fall Product or Cookie Program proceeds)

\$ \_\_\_\_\_ Amounts received through money-earning or donations

\$ \_\_\_\_\_ Total needed to complete activity

Notes:

\_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_  
Submitted by, Title

Funds will be sent to the address on file for the troop leader, unless otherwise specified here:

\_\_\_\_\_

PLEASE SUBMIT THIS FORM TO GIRL SCOUTS OF COLONIAL COAST  
WITHIN 24 HOURS OF RECEIVING THE FUNDS.

912 Cedar Road, Chesapeake, VA 23322 | [customercare@gsgccc.org](mailto:customercare@gsgccc.org)

REV 10/3/24 PHIL