girl scouts of california's central coast

Girl Scouts of California's Central Coast

YEAR-END TROOP REPORT (year)_____

To be completed and submitted by November 1

Troop number _____ Age Level(s) _____ Number of girls _____

Leader Name_____ E-mail _____

Prepared by_____ E-mail _____

(if other than Troop Leader)

Income and Expense Report	
A. Beginning Balance 10/1	
B. Income:	
Total Income	**$**
C. Expenses:	
:	
Total Expenses	
Balance on Hand 9/30	**$**

If Balance on Hand is over $300.00, how will money be spent. *Note: You should try to spend troop money in the year earned.*
Remaining funds will be used for:

Tell us about your year . . . (from October 1-September 30)
Insignia/Awards Earned:
Community Service Projects:
Camping/Overnight Activities:
Field Trips and Other Activities:
Service Unit Events Attended:

Troop Inventory (items given to troop/purchased with troop funds)	

Location of Troop Inventory:
Fun troop activities you would like to share with others (give contact name, e-mail address & phone number, please):

Signed: _____ Date: _____

Submit completed form to Service Unit Treasurer:_____

KEEP A COPY FOR YOUR RECORDS

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