

**Troop or Group leader/advisor and/or girl representative complete and submit to the Membership Associate at least one (1) month before the proposed project.**

**Troop/Group Information**

Leader/Advisor or Girl Representative	Troop/Group #	Service Unit #
Address ( )	City ( )	State      Zip Code
Home Phone	Cell Phone	Email

**Project Information**

Our troop/group requests permission for an additional money earning project to help finance the following program/activity: \_\_\_\_\_

Date of Program/Activity: \_\_\_\_\_

Our money earning activity will be (be specific): \_\_\_\_\_  
\_\_\_\_\_

Date(s) and names of other anticipated additional money earning project(s) related to this program/activity: \_\_\_\_\_  
\_\_\_\_\_

**Troop/Group Financial Information in Regard to Girl/Adult Participation in the Planned Program/Activity:**

This activity is projected to raise	\$	_____
	\$	_____
Amount to be paid from the current troop/group treasury		_____
Amount to be paid by each participating girl		
\$ _____ X number of girls ( ) participating	\$	_____
Amount to be paid by each participating adult		
\$ _____ X number of adults ( ) participating	\$	_____
<b>TOTAL</b>	\$	_____

Last Year's Troop/Group financial report has been submitted to service unit manager. \_\_\_\_\_ Date

Most recent participation in council product sale(s): \_\_\_ Fall Product \_\_\_ Cookie \_\_\_\_\_ Date

Next expected troop/group participation in council product sale: \_\_\_ Fall Product \_\_\_ Cookie \_\_\_\_\_ Date

**I have read all Girl Scouts in the Heart of Pennsylvania policies and procedures in regard to supplementary money earning projects (consult *Volunteer Essentials*) and verify that all information on this request is accurate.**

Leader/Advisor or Girl Representative \_\_\_\_\_ Date

Approval -  **Granted**     **Denied** by:

Membership Associate \_\_\_\_\_ Date