

Policy: Individuals, groups, and troops must have prior approval for all money-earning activities other than council-approved product sales.

This form must be filled out for all money earning activities and returned to your Service Unit and Troop Support Manager one month prior to the activity. Please read the section in *Volunteer Essentials* on money earning activities prior to submitting this application. Troops or groups requesting approval for an additional money-earning project should also participate in the Girl Scout Cookie Program. If approved and once the project is complete, please fill out the Money Earning Project Report Form and return it to your Service Unit and Troop Support Manager within 2 weeks of the project.

Troop Number \_\_\_\_\_ Service Unit \_\_\_\_\_ Age Level BR JR CA SR AM

Troop Leader \_\_\_\_\_ Phone: Day \_\_\_\_\_ Evening \_\_\_\_\_

Email Address \_\_\_\_\_

Please fill out the following financial information:

- |  |          |
|--|----------|
| 1. Cookie sale profit                  | \$ _____ |
| 2. Fall product sale profit            | \$ _____ |
| 3. Total in treasury to date           | \$ _____ |
| 4. Additional funds required           | \$ _____ |
| 5. Anticipated profit for this project | \$ _____ |

Briefly describe the reason for the money earning project:

Money Earning Project Name \_\_\_\_\_ Date of Project \_\_\_\_\_ Time \_\_\_\_\_

Location of Project \_\_\_\_\_

Briefly describe your project:

I have read the section on money earning activities in *Volunteer Essentials*.

Troop Leader's Signature \_\_\_\_\_ Date \_\_\_\_\_

**For Girl Scout Council Use Only**  
Service Unit and Troop Support Manager Comments

Request Granted Request Denied

SUTSM Signature \_\_\_\_\_ Date \_\_\_\_\_

Copy sent back to Troop Leader on \_\_\_\_\_. SUTSM: Retain a copy in your files.