



## Troop/Group Year-End Financial Report 20\_\_ - 20\_\_

**Please Print**

Troop/Group No.	Level (circle one) D B J C S Ambassador	# of Girls:	Service Unit:
Leader's/Advisor's Name		Address, Town, Zip Code	
Day Phone with Area Code	Evening Phone with Area Code	Email	

Please complete **both** pages. Give two copies to your Service Unit Manager or her/his designee, along with a copy of your last bank statement, by \_\_\_\_\_. Keep one copy for your records.

Income (Money Deposited in Account)	
Balance at beginning of period (ending balance from last year-end financial report)	\$
1. GSUSA Annual \$12 Registration Fee per girl and/or adult	\$
2. Financial Assistance from the Service Unit or GSOFACT	\$
3. Troop/Group Dues	\$
4. Girl Scout QSP Program (total income collected)	\$
5. Girl Scout Cookie Program (total income collected)	\$
6. Money-Earning Activities Income (MEA)	\$
7. Programs/Trips/Events/Projects, etc. (specify details on page 2)	\$
8. Monetary Contributions (specify details on page 2)	\$
9. Troop/Group Supplies (specify details on page 2)	\$
10. Miscellaneous Revenue (specify details on page 2)	\$
<b>TOTAL INCOME</b>	<b>\$</b>

Expenses (Money Withdrawn from Account)	
1. GSUSA \$12 Registration Fee x no. of people	\$
2. Financial Assistance to girls/adults	\$
3. Troop/Group Equipment Purchases, i.e., tents, etc. (specify details on page 2)	\$
4. Girl Scout QSP Program (total payment to Council)	\$
5. Girl Scout Cookie Program (total payment to Council)	\$
6. Money-Earning Activities Expenses (MEA)	\$
7. Programs/Trips/Events/Projects, etc. (specify details on page 2)	\$
8. Service Project Expenses and Donations, i.e., Juliette Low World Friendship Fund and other charities (specify details on page 2)	\$
9. Troop/Group Supplies (specify details on page 2)	\$
10. Miscellaneous Expenses, i.e., bank charges, training, etc. (specify details on page 2)	\$
<b>TOTAL EXPENSES</b>	<b>\$</b>

BANK/CHECKBOOK RECONCILIATION		* This figure should be your beginning balance for next year.	
Total Income	\$	Bank Statement Balance as of _____	\$
Total Expenses (subtract)	-	Outstanding Checks & Deposits	+/-
New Balance	= \$*	Checkbook Balance	= \$*

← These should be the same →

Plans for remaining "Balance" : \_\_\_\_\_

**YOU MUST COMPLETE AND SIGN PAGE 2 OF THIS REPORT**

**SPECIFIC DESCRIPTION OF DONATIONS AND EXPENSES**

Monetary Contributions received by Troop/Group (List contributions)	
Programs/Trips/Events/Projects, etc., contributions	
Miscellaneous Revenue	
Troop Proceeds QSP Program	\$
Troop Proceeds Cookie Program	\$

Troop/Group Supplies and/or Equipment purchases, i.e., tents, etc.
Programs/Trips/Events/Projects, etc., expenses
Service Project Expenses and Donations to charities from the troop, i.e., Juliette Low, etc. (list donations made)
Miscellaneous Expenses (bank charges, training, etc.)

**Definitions:**

- Bank Charges: Service charges and check order fees charged by bank.
- Beginning Balance: This amount should reflect the ending balance of the prior year's Finance Report. If a new troop, the beginning balance starts with troop dues.
- Contributions: All funds received from any outside agency, organization, or individual (not to exceed \$250 per year).
- Financial Assistance: Total of all funds received from the Girl Scouts to support girls in Troop/Group.
- MEA: Profit earned from all Troop/Group money-earning activities.
- Registration: Funds collected for annual GSUSA Registration (\$12.00).
- Training: Fees used to provide training of Leaders or adult volunteers (i.e. First Aid).
- Trip & Travel: Funds collected for Service Unit events, camping, field trips, and Council-sponsored programs.
- Troop/Group Dues: Funds collected from girls for program activities.
- Troop/Group Supplies: Including, but not limited to, craft supplies, refreshments, equipment, etc.

**BANK INFORMATION**

Troop/Group Number \_\_\_\_\_ at \_\_\_\_\_ (name of bank), located at \_\_\_\_\_ (city), Bank Account Number \_\_\_\_\_; to include the Council non-profit number 06-0662134.

\_\_\_\_\_  
Person Holding Bank Account Records

\_\_\_\_\_  
Day Phone with Area Code

\_\_\_\_\_  
Evening Phone with Area Code

**List ALL Troop/Group Bank Account Signatories** (Signatories must be registered members of Girl Scouts of the USA) (attach additional sheets if needed):

1. \_\_\_\_\_ Phone: \_\_\_\_\_
  2. \_\_\_\_\_ Phone: \_\_\_\_\_
  3. \_\_\_\_\_ Phone: \_\_\_\_\_
- \_\_\_\_\_ Service Unit Manager or Service Unit Treasurer

**This is a true and accurate summary of our fiscal year's revenue and expenses.**

\_\_\_\_\_  
Submitted by (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date