



2025/2026 Product Program
Outstanding payments owed to troop by individual girl/household

This form is to be submitted when a girl/household has an outstanding balance from Fall Product Program or Cookie Program. By submitting this form, the troop will not be held responsible for the individual girls outstanding balance.

Date _____

Troop# _____ Service Unit (name and number) _____

Troop Leader name _____ Telephone _____

Name of Girl Scout _____

Name of Parent Guardian _____

Address _____

Telephone _____ Email _____

Balance owed \$_____

Please indicate any attempts you have made to collect the outstanding funds and or any pertinent information that we should know when contacting this family. _____

Submit with a copy of the original parent/guardian permission form.

Submit to GSCV 3214 Skipwith Road, Richmond, VA 23294 or electronically to
ghelper@comgirlscouts.org