

Girl Scouts of Mitten Bay
Application for Permission for Service Unit Money-Earning Project
 [Service Unit money-earning project is entirely adult generated and implemented]

Service Unit # _____
 Service Unit Manager _____ Phone # _____
 Address: _____
 City: _____ Zip: _____
 Service Unit Sponsor(s): _____

Copy of current Service Unit Budget MUST be attached

- A. Money in Service Unit Treasury as October 1st\$ _____
- B. Estimated or Actual Income for Year (October thru September)
 - a. _____ \$ _____
 - b. _____ \$ _____
 - c. _____ \$ _____
 - d. _____ \$ _____
- C. Total Money available for year [A + B = C] \$ _____
- D. Expenses to date \$ _____
- E. Amount needed for program activities for balance of year \$ _____
- F. Additional money needed [C - D + E = F] \$ _____
- G. Current balance in Service Unit Treasury \$ _____

Request for Additional Money-Earning Project

MUST be submitted 30 days prior to project

Reason for additional money-earning project:

Type of Project: _____ Date of project: _____

Description of Project:

How will this event be advertised/promoted? **Copy of flyer, advertisements, etc. MUST be attached for project to be approved.**

- A. Anticipated Income from project.....\$ _____
- B. Anticipated Expenses (supplies, postage, product, etc.)\$ _____
- C. Anticipated Net Profit [A – B].....\$ _____

Have you had any other money earning projects this program year? [October - September)

Yes ____ No ____

If so, what were they, date held and how much money was earned?

I have read and agree to adhere to all council procedures on Service Unit money-earning projects

Service Unit Manager Signature Date

The reasons for this service unit money-earning project have been reviewed. Additionally, the project itself has been reviewed for consistency with the money-earning standards of GSUSA and council money-earning policies and procedures. The project is adult generated and will be conducted by adults.

_____ Permission is granted for your project.

_____ Permission is **NOT** granted for your project.

Membership Specialist Signature Date

Comments: _____
