



Girl Scouts of Cahaba Council ANNUAL REPORT OF THE TROOP TREASURER

For TROOPS to complete as required

Report Date ____/____/____ thru ____/____/____

Troop Number _____ Service Area _____

Leader's Name _____ Telephone # _____

BALANCE FROM PREVIOUS YEAR

\$ _____

INCOME

- 1. Registration \$ _____
- 2. Total Cookie Income *(Troop profit plus amount due Council)* _____
- 3. Donations Received by Troop _____
- 4. Dues Collected _____
- 5. Other Income *(Explain)* _____
- 6. Total *(Items 1 thru 5)* \$ _____
- 7. **Total Income** *(Balance from previous year PLUS Items 1 thru 5)* \$ _____

EXPENSES

- 8. Registration Paid Council \$ _____
- 9. Payment to Council for Cookies _____
- 10. Pins, Badges, etc. Purchased _____
- 11. Camping Expenses _____
- 12. Troop Activity Expenses _____
- 13. Program & Troop Supplies _____
- 14. Juliette Low World Friendship Fund Gift _____
- 15. Other Expenses *(Explain)* _____
- 16. **Total Expenses** *(Items 8 thru 15)* \$ _____

BALANCE *(Item 7 minus Item 16)* \$ _____

Troop Treasurer's Signature _____

Leader's Signature _____

Troop Approved? Yes No Date: _____

Troop Bank and Account Number _____

Return: 1 Copy to: Girl Scouts of Cahaba Council 1 Copy to: Service Area Manager
105 Heatherbrooke Park Drive
Birmingham, Alabama 35242-8008

