

Due December 1

# Payment Checklist

SU \_\_\_\_\_

Submit this form & attachments  
to SU Cookie Manager

Troop # \_\_\_\_\_

Troop Leader \_\_\_\_\_

Phone # \_\_\_\_\_

Troop Cookie Manager \_\_\_\_\_

Phone # \_\_\_\_\_

Check to GSRHC, be sure to check amount on your SU website  
(Endorse check on back: for deposit only, GSRHC, #0036-24521-2)

Copy of deposit slip **receipted by bank**

Gift of Caring - Troop Report

Cookie Share patch payment if ordering patches  
Must be separate check (do not include with cookie payment)

Cookie Credit envelopes (for Brownies and Juniors who sold 75+ boxes)  
Be sure you have correct addresses.

T-1, Pink Copy

Additional Girl Orders

<u>Name</u>	<u>Original Order</u>	<u>Add'l Boxes</u>	<u>New Total</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

This information will be forwarded to the SU Nut Manager

**Troop Nut Manager** (ask your leader)

SU \_\_\_\_\_

Troop # \_\_\_\_\_ # Girls \_\_\_\_\_

Troop \_\_\_\_\_

Name \_\_\_\_\_

Phone # \_\_\_\_\_

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