



# Girl Scouts of Greater Chicago and Northwest Indiana

Vernon Hills Regional Service Center  
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## Annual Finance Report Form

Report due to your VISTA Manager/United Way Ambassador by **June 15, 2009**.

VISTA # \_\_\_\_\_ Troop # \_\_\_\_\_ Age Level: D B J C S A # of Girls \_\_\_\_\_

Leader Name \_\_\_\_\_ Phone # \_\_\_\_\_

**Report on Troop Funds - June 16, 2008 through June 15, 2009.**

### INCOME

### EXPENSE

Beginning Balance	\$	National Registration Dues	\$
National Registration Dues	\$	Supplies Purchased:	
Dues (rate _____ per meeting)	\$	Camping / Outdoor Activities	\$
Money-Earning Activity:		Overnight Trips	\$
Fall Product Activity Profit	\$	Service Projects	\$
Cookie Program Activity Profit	\$	Insignia (Pins, Badges, etc.)	\$
*Other	\$	Social Events	\$
Activity Grant(s)	\$	Program Supplies	\$
Insignia (Pins, Badges, Patches)	\$	Community Events	\$
Donations Received	\$	Permanent Equipment	\$
Other Income (specify)	\$	Other Expenses (specify)	\$
	\$		\$
	\$		\$
	\$		\$
<b>Total Income</b>	<b>\$</b>	<b>Total Expense</b>	<b>\$</b>

**Troops must participate in both council-sponsored product activities before permission will be granted for additional money-earning activities.**

Balance on-hand June 16, 2008 \$ \_\_\_\_\_ Troop is  continuing  disbanding  
 Troop funds are deposited in checking / savings account # \_\_\_\_\_  
 at the \_\_\_\_\_ bank in the \_\_\_\_\_ community.

The persons authorized to withdraw funds are:\*\*

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**\*\* At least 1 signature must be the VISTA Manager/United Way Ambassador or a designated VISTA cabinet member.**

What plans do the girls have for the funds remaining in their account? \_\_\_\_\_

Report completed by \_\_\_\_\_ Date \_\_\_\_\_

Please initial:  
 Verified by Finance Management Partner \_\_\_\_\_ Date \_\_\_\_\_  
 Verified by Finance Management Ambassador \_\_\_\_\_ Date \_\_\_\_\_  
 Received by Membership/Program Staff Member \_\_\_\_\_ Date \_\_\_\_\_

## Report on Troop Program

Our service projects were \_\_\_\_\_  
\_\_\_\_\_

The girls voted the three most successful activities were:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

How did the troop make their school / neighborhood / community a better place this year?  
\_\_\_\_\_  
\_\_\_\_\_

What was the single biggest accomplishment for your troop this year?  
\_\_\_\_\_  
\_\_\_\_\_

Please list permanent equipment owned by the troop and where it is held.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

YES NO

Did your girls have a campout or an overnight? Where? \_\_\_\_\_

Did your girls participate in any inter-group, or VISTA events?  
Which ones? \_\_\_\_\_

Did your girls work on Girl Scout recognitions this year? Which ones?  
\_\_\_\_\_  
\_\_\_\_\_

Did your group take any day or extended trips this year?  
Where? \_\_\_\_\_  
\_\_\_\_\_

Did the **girls** decide upon the amount of group dues?

Was a budget developed based on the activities planned by the **girls**?

How often did your group meet?  Every week  Twice a month  Once a month  Other  
If other, what was the meeting schedule? \_\_\_\_\_

Rate your overall experience as a Girl Scout leader:  Poor  Fair  Good  Excellent

Rate the service/help that you received from your cabinet team:  Poor  Fair  Good  Excellent

How could your VISTA cabinet help you to be a better leader? \_\_\_\_\_  
\_\_\_\_\_

Was your Girl Scout troop regularly represented at VISTA meetings?

Yes  No If no, why not? \_\_\_\_\_

What trainings did you take this year? \_\_\_\_\_

Would you like to be re-appointed to this position?

Yes  No Name \_\_\_\_\_

Would your co-leaders or assistant leaders like to be re-appointed to their positions?

Yes  No Name \_\_\_\_\_

Yes  No Name \_\_\_\_\_

Yes  No Name \_\_\_\_\_