

# Troop Payment Request Form



All reimbursement and payment must be reconciled within the same Girl Scout fiscal year in which expenses were accrued. Sales tax will not be reimbursed or paid out.

Reimbursements and payments to vendors, volunteers, parents/ caregivers, will be issued via check upon the completion of this form. A troop leader will be reimbursed by a check signed by another account signer other than themselves, and receipts must be attained and recorded.

Payee/Vendor Name: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Request: ☐ Vendor Payment ☐ Volunteer/Parent/Caregiver Reimbursement

Date	Description	Cost	Total

Please Attach Receipt(s) or Invoice(s) To This Form

Total Payment Requested: \$ \_\_\_\_\_

Submitted By (Name) \_\_\_\_\_ Date \_\_\_\_\_

**Troop Use Only:** Date received \_\_\_\_\_

Name of Volunteer Account Signer \_\_\_\_\_

Signature of Volunteer Account Signer \_\_\_\_\_