



Girl Scouts Central Maryland
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**Girl Scouts of Central Maryland
 Service Unit and/or Cluster Annual Report-Financial Information**

Date _____ Service Unit # _____ Cluster(If Applicable)_____

Name of Bank Address _____

Account Number _____

Signatures on Account 1. _____ 2. _____
 3. _____

Balance on Last Year's Report \$ _____

Income: Please List
 _____ \$ _____

_____ \$ _____

_____ \$ _____

Total Income \$ _____

Expenses:

Adult Recognitions \$ _____

Postage/Office Supplies \$ _____

Telephone \$ _____

Food/Refreshments \$ _____

Community Equipment/Supplies/Books \$ _____

Assistance to New Troops \$ _____

Community Events \$ _____

Other _____ \$ _____

_____ \$ _____

Total Expenses \$ _____

Final Balance as of _____ \$ _____

List inventory of items that are valued individually at \$50.00 or more.

Item	Amount
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

SIGNATURE OF SERVICE UNIT MANAGER _____

(PLEASE ATTACH A COPY OF YOUR LAST BANK STATEMENT TO THIS REPORT)