



DELINQUENT COOKIE ACCOUNT FORM

T-6

Please check one:

- INDIVIDUAL PARENT/GUARDIAN DEBT
TROOP/GROUP COOKIE MANAGER DEBT
TROOP/GROUP LEADER DEBT

Fill out a separate form for each delinquent parent/guardian or adult with an outstanding debt to the Troop/Group. Attach a copy of the Family Adult Permission Form (G-1) and all signed documentation that shows proof the product was received by the individual. ANY CHANGES IN THE STATUS OF THE ACCOUNT AFTER SUBMITTING THIS FORM SHOULD BE REPORTED TO THE DIRECTOR OF PRODUCT SALES AT GIRL SCOUTS OF CENTRAL MARYLAND 410.358.9711, extension 227. Girl Scouts of Central Maryland is not responsible for misinformation provided by Troops/Groups.

Date: Area/County:

Service Unit #: 6 Troop/Group#:

Name of Responsible Person:

Address:

Street Address City State Zip Code

Home Telephone #: Work Telephone #:

Child's full Name: (attach signed G-1)

Total product received from troop/group: boxes of Girl Scout Cookies (attach signed documentation)

Total amount due: \$

Amount paid: \$

Total Amount Outstanding: \$

Girl Scouts of Central Maryland will pay or reduce the troop's cookie balance by the amount listed above as all monies are now due and payable directly to Girl Scouts of Central Maryland.

What attempts were made to collect from individual:

Blank lines for describing collection attempts.

X

TCM Signature Date Home Telephone Work Telephone

X

Troop/Group Leader Signature Date Home Telephone Work Telephone

X

Service Unit Manager Signature Date Home Telephone Work Telephone

X

Responsible Person's Signature Date

X

GSCM Director of Product Sales Signature

Date

**Submit completed form including all back-up documentation to:  
Girl Scouts of Central Maryland  
4806 Seton Drive  
Baltimore, MD 21215  
Attention: Director of Product Sales**

04/17