



2026-2027 PRODUCT PROGRAMS ACH DEBIT AUTHORIZATION

Troop # _____

Service Unit Number _____

This form is to be used by all Girl Scouts of Southern Nevada troops to authorize ACH Debit Transactions during the 2026-2027 Girl Scouts of Southern Nevada Product Programs. Failure to complete this form and return to your Service Unit Entrepreneurship Team Member of Council will result in a troop removal from the operating system of each Product Program. Money must be in the troop account on the day listed below. The ACH Sweep will take place within a week of that date.

The Troop acknowledges and agrees to:

FALL 2026

- Penny Sweep – Test ACH of \$.01
September 30, 2026
- The First ACH (balance owed to Council less troop proceeds) will be deducted within the week of
November 4, 2026
- The Final ACH (balance owed to Council less troop proceeds) will be deducted within the week of
November 18, 2026

COOKIES 2027

- Penny Sweep – Test ACH of \$.01
January 20, 2027
- The First ACH (balance owed to Council less troop proceeds) will be deducted within the week of
January 17, 2027
- The Second ACH (balance owed to Council less troop proceeds) will be deducted within the week of
March 3, 2027
- The Final ACH (balance owed to Council less troop proceeds) will be deducted within the week of
March 24, 2027

- Troops are responsible for depositing enough funds to cover these debits and any resulting non-sufficient funds (NSF) charges.
- Any funds to troops will be credited via ACH or by GSSVN Check.
- Troops explicitly authorize Girl Scouts of Southern Nevada to repeat debits that fail for any reason.
- Troops agree to work closely with Girl Scouts of Southern Nevada to pay all amounts due to Council
- Troops understand that they may not participate in further Product Programs or Money Earning activities until all ACH Debit Authorization are received by GSSNV Council.

This authorization must be signed by an authorized check signer for the troop.

Financial Institution Name _____

Routing Number _____ Account Number _____

Print Name _____ Position _____

Mailing Address _____ City, Zip _____

Phone Number _____ Email Address _____

Authorized Signer Signature _____