

Troop Financial Management Agreement

Policy: All money and other assets, including property, that are raised, earned, or otherwise received in the name of and for the benefit of Girl Scouts must be held and authorized by the Girl Scout of Southern Nevada. Such money and other assets must be used for the purposes of Girl Scouting only. They are the property of and are administered by the Girl Scouts of Southern Nevada. Such assets are not the property of individuals, troops, service units or communities within the Girl Scout of Southern Nevada.

Policy: All registered adults of Girl Scouts of Southern Nevada are responsible for properly caring for and handling council and/or group assets that are entrusted to them. Assets are defined as money or physical property owned by Girl Scouts of Southern Nevada and in the custodial possession of any troop, service unit, committee, volunteer, etc.

Please initial you have read and understand the following statements:

_____ I understand as signer that only appointed signers who are registered, background checked, approved volunteers, can act as the custodial managers of Girl Scout assets.

_____ I completed as a signer, financial training as required and am fully knowledgeable of and understand all policy, procedures, and accountability pertaining to troop banking.

_____ I understand as signer, I must actively review and approve all troop finance practices (income and expenses) on a regular basis.

_____ I understand as signer I must maintain a detailed accounting of any/all income received and expenditures with receipts, and must submit a copy of said items along with a Troop Treasury report on or before July 31st of all expense receipts for the period or as requested by Girl Scouts of Southern Nevada.

_____ I understand as a signer, I am accountable for all checks and balances for troop program expenses.

_____ I understand as a signer I will not give possession of the troop checkbook, debit cards or access to troop finances to any other individual who is not an authorized signer on the account; if I do so, I will be held fully liable for the full financial accounting and/or any debt incurred because of this action.

_____ I understand as signer on the bank account, the account is likely to be frozen (leaving you no access) or closed as a result financial restrictions, termination, or change in membership status for the following reasons:

- Failure to take corrective actions from monthly review notice or failure to keep account in good standing. Failure to make deposits as required or failure to pay you troop product program bill
- Soliciting or securing sponsorships, donations, or money-earning without council approval
- Failure to keep troop currently registered
- Failure to turn in you Troop Treasury Report and receipts as required
- Financial discrepancies between adults who manage the account
- Inappropriate use of funds or reporting, or mismanagement of assets, intentional or unintentional
- Failure to comply with GSSNV Policy and Procedures

By signing below, I understand and agree to all mentioned above as signer I will be held legally responsible for the accounting of all financial activity, and if the account becomes mismanaged and fees are accumulated, it is my responsibility to personally pay such fees assessed by the bank or other business in collection of such debts.

Print Name: _____ Signature: _____

Date: _____ Troop: _____ Position: _____