



TROOP REQUEST FOR COLLECTION ASSISTANCE

Troop # \_\_\_\_\_ Service Unit Name \_\_\_\_\_ Service Unit # \_\_\_\_\_

Leader's Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**UNPAID DEBT**

Girl's Name \_\_\_\_\_ Parent's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Amount Due \$ \_\_\_\_\_ **Include copies of signed parent permission slip and receipts.**

Total items sold \_\_\_\_\_ Payments to date \_\_\_\_\_

Leader's Signature \_\_\_\_\_ Date \_\_\_\_\_

Service Unit Product Sale Manager Signature \_\_\_\_\_ Date \_\_\_\_\_

**REMINDER:** Troop should retain their troop profit. The amount requested for collection assistance should be deducted from the amount of payment owed to the council. This paperwork should accompany the troop's final payment for product sales.

**NOTES:**

**FOR OFFICE USE ONLY**

Date application received \_\_\_\_\_ Collection Agency \_\_\_\_\_

Final resolution date \_\_\_\_\_ Other (explain) \_\_\_\_\_

Payment received \_\_\_\_\_