

Alert Form A Delinquent Payment

Today's Date: _____ Troop #: _____

Girl with outstanding balance: _____

Parent's Name: _____

Address: _____

City/State/Zip: _____

Home #: _____ Work #: _____ Cell # _____

TOTAL AMOUNT OUTSTANDING: \$ _____

Name and phone number of Individual completing this form:
_____ (____) _____ - _____

Action Taken (include date): _____

Action Taken (include date): _____

Additional information that will assist in collecting this debt:

Include this form and a copy of the girl's signed Parent Permission Slip and cookie receipt with Final Paperwork. Do not delay sending in your Final Paperwork and payment because of this outstanding balance and do not use troop money to pay for this outstanding balance.