

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 Form, and all signed cookie receipts for this girl, with final paperwork. Do not delay In submitting your final paperwork and payment because of this outstanding balance. DO NOT USE TROOP MONEY TO PAY THIS DEBT.