



Girl Scouts of Southeastern Michigan

Money-Earning Project Request Form for Troops & Groups

Girl Scouts of Southeastern Michigan

c/o Money-Earning Project

1333 Brewery Park Blvd, Suite 500

Detroit, MI 48207

Email: customercare@gssem.org | Phone: 800-482-6734

Please **submit this form at least 21 days**
prior to your planned project start date
and keep a copy for your records.

Project Information

Service Unit: _____ Troop #/Group: _____

Program Level (circle): Daisy Brownie Junior Cadette Senior Ambassador Adult

Leader's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ Cell: () _____

Email: _____

of girls in troop: _____ # of girls participating _____

Explain the type of project you are requesting permission to undertake: (explain on reverse if more room is needed. BE SPECIFIC!)

We expect to earn \$: _____ To help with our plans for _____

Location & Time

Date(s) and time (s) of proposed money-earning project: _____

Site(s) of project: _____

Have you secured permission from the proper site authorities to do your project?

☐ YES: List contact name, position, contact info

☐ NO (Please explain, use reverse if needed)

Money-Earning History

We have had _____ other money-earning projects this year. Current balance in troop bank account \$ _____

Our troop/group participated in the fall product sale as of _____ and earned \$ _____ profit.

Date

Our troop/group participated in the cookie sale as of _____ and earned \$ _____ profit.

Date

☐ I've read & understand the Money-Earning Project Standards. **Leader Signature X** _____ **Date** _____

GSSEM Approval (For internal use only)

☐ Approved ☐ Not Approved

GSSEM Representative X _____ **Date** _____