



APPLICATION FOR MONEY EARNING PROJECT

See Council Policies, Standard 29 (Safety-Wise)

Submit completed form with the "Budget for Events & Money Earning Projects" (PS-5) to your Neighborhood or Financial Consultant/Designee, THREE WEEKS BEFORE YOUR MONEY EARNING PROJECT.

Troop/Group # _____ Program Level _____ Neighborhood _____

Leader's Name _____

Leader's Address _____

Home Phone _____ Work Phone _____

Project for which permission is requested _____

to be held on _____ at _____
Date *Place*

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

Our troop/group participated in the cookie sale as of _____

We have had _____ other money earning projects this year.

Current balance in troop account(s): \$ _____

Signature of Neighborhood or Financial Consultant/Designee

Granted Date _____

Not Granted Reason _____

(Return this portion of the form to your Neighborhood or Financial Consultant/Designee within ten days after the project.)

Report of Monies Earned by Money Earning Project

Date _____

Total Amount Earned \$ _____

Cost of Materials \$ _____

Net Profit to Troop/Group \$ _____

These monies have been placed in account # _____ at _____.

We do do not recommend this money earning project for others.

Signature of Troop/Group Leader