

There are two types of delinquencies: parent and troop volunteer. To be a valid form of payment the Delinquency form must be completed with all supporting documentation attached and submitted to council within two weeks from the final payment deadline. If the form is not complete with supporting documentation attached, NO adjustments will be made to the troop balance.

**Program** (*check one*)    Cookie Program    Fall Product Program   **Today's Date** \_\_\_\_\_

**Debtor's Name** \_\_\_\_\_   **Debtor's Past Due Amount \$** \_\_\_\_\_

**Service Unit** \_\_\_\_\_   **Troop#** \_\_\_\_\_

**Who owes the money?**    Parent    Troop Co-Leader    Troop Product Manager

**Documentation must be included:** (*all communication efforts (emails, texts, etc.), plus items below*)

**Parent:**    Signed Parent Permission form    Signed product/payment receipts

**Troop Co-Leader/Product Manager:**    Troop Vol. Position Description    Signed product/payment receipts

**Complete debtor information below**

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Phone (cell/home) \_\_\_\_\_

Driver License # \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Work \_\_\_\_\_

**Person completing the form**    Co-Leader    Product Manager

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

**Co-Leader must approve information on form & documents.**

Name \_\_\_\_\_

Signature \_\_\_\_\_

**What has been done to collect the money owed?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PARENT DELINQUENCY AMOUNT	
Boxes Received from Troop	
Balance Shown on T-2	\$
Amount Due From Parent	\$
Less Amount Paid By Parent	\$
Balance Due From Parent	\$
TROOP DELINQUENCY AMOUNT	
Boxes Received from Council	
Balance Shown on T-2	\$
Amount Due Council	\$
Less Amount Paid Council	\$
Balance Due From Troop	\$
If you receive any payment for the amount declared, email documentation to <a href="mailto:customer-care@gswny.org">customer-care@gswny.org</a> .	
<b><i>The documents below must be attached:</i></b>	
<b>Parent</b>	
<input type="checkbox"/> Parent Permission form	
<input type="checkbox"/> Signed receipt for product received	
<input type="checkbox"/> Signed receipt for any payment	
<input type="checkbox"/> Troop Balance Summary Report T-2	
<b>Troop Volunteer</b>	
<input type="checkbox"/> Volunteer Position Description	
<input type="checkbox"/> Signed receipt for product received	
<input type="checkbox"/> Signed receipt for any payment	
<input type="checkbox"/> Troop Balance Summary Report T-2	