



JULIETTE PROCEED CREDIT REIMBURSEMENT FORM

(All deposits need to be in check form)

Date: _____ Girl Scout Name: _____ Grade: _____

Parent/Guardian Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Description of Girl Scout money earning activity: (i.e. Bagging groceries at local supermarket)

Amount Submitted. \$ _____

Juliette Proceed Credits will be issued in the nearest whole dollar amount.

(i.e. a deposit of \$23.49 will receive \$23 in Juliette Proceed Credits.)

Girl Signature: _____

Signature of parent/guardian or Juliette advisor: _____

Print completed form and mail with deposit to:

Girl Scouts of Minnesota and Wisconsin River Valleys
St. Paul Service Center
400 Robert Street South
St. Paul, MN 55107

Please keep a copy for your records.

Juliette Proceeds Credits are not transferable.

Incomplete forms will be returned and result in a processing delay.

Please allow at least three weeks for processing.

For office use only: Received date: _____

Processed Date: _____

Check Request Amount: _____
10 - 2250

Approval Signature: _____ Date: _____