

**Troop/Group Money Earning Activity
Report & Evaluation**

Contact us at 800.960.2093

info@gslpg.org



INSTRUCTIONS: Complete the form and email to info@gslpg.org within 14 days after the money earning activity occurred.

TROOP/GROUP # _____ PROGRAM LEVEL _____ SU # _____

Leader's Name _____

Address _____ City _____ Zip _____

Phone # (h) _____ (w) _____ (c) _____

Email _____

Name of Troop Support Specialist _____

1. Name of place of money earning activity:

2. Date held and times:

3. Was this activity successful? Yes No
Did the troop/group reach the expected goal? Yes No

4. Approximately how much time did the troop/group devote to this activity? (in all stages: plan, implement, and evaluation)? _____

5. What experiences did the girls and adults gain in carrying out this activity?

Total Income from activity _____

Total Expensive of activity _____

Net Proceeds _____

Leader's Signature _____ Date _____