

UNIT ACCOUNT

Unit

Pack # _____
Troop # _____
Crew # _____
Post # _____
Ship # _____

ALL UNITS
Please fill this out to
update your unit account
information.
Return it to the council
service center.

District

Sycamore _____
Wanchanagi _____
White Eagle _____
Wetassa _____
Arrowhead _____
Ranger _____

Committee Chairman (Please print)

Name _____ Phone _____
Address _____
City _____ State _____ Zip _____

Unit accounts are set up for the convenience of the unit. The treasurer may deposit money so awards can be bought at a later date, for registrations, camp fees etc. Should the purchase total more than the amount on account, another form of payment must be used to complete the transaction. You may put the balance on a VISA, MasterCard, American Express, or Discover. We can hold the order until the unit sends additional funds or we can send a portion of the order as the funds permit. A Print out of transactions is available upon request.

****REQUIRED** Please indicate the following for your account:**

- _____ Scout Shop purchases only (awards, books, etc. incl. camp fees, etc.)
- _____ Registration and Recharter fees only
- _____ All--Scout Shop purchases, Registration fees, Camp fees, etc

Some units have their accounts restricted as they have had problems in the past. If your unit restricts their account keep these things in mind:

- Limit the names to three. (One *must* be the Committee Chairman)
- Remember, if someone else is sent to pick up items for you they will not be allowed to use the account
- The registrar has access to the account to process registrations.
- As leaders change, submit update Unit Account Form signed by the Committee Chairman

So unless you really have the need, we wouldn't recommend a restricted account since it may be more inconvenient. Another option, if you need you may request receipts be sent to the treasurer.

For Restricted Accounts Only no more than 2 authorized persons to make purchases against the unit account in addition to the Committee Chairman.

1. Name _____ 2. Name _____
Position _____ Position _____

Authorization of Unit Committee Chairman:

(Signature) _____ / _____ / _____ (Date)