



Donation Form for Troop/Group Gifts

MATCHING GIFT

NON MATCHING GIFT - OVERAGE TO COUNCIL

Total Donation: \$ _____ Troop/Group to keep: \$ _____ Overage Amount to Council: \$ _____

- GSGLA Council policy states that Troops/Groups (Daisy, Brownie, Junior) may receive a matching gift from any one source during one Girl Scout year of up to \$250. For gifts in excess of \$250, the balance will remain with the Council.
- In the case of older girl Troops/Groups (Cadette, Senior, Ambassador), Troops/Groups may receive a matching gift from any one source during one Girl Scout year of up to \$1,000. For gifts in excess of \$1,000, the balance will remain with the Council.
- All matching gifts **MUST** be payable to GSGLA and mailed to the Council address below along with a completed copy of this form. GSGLA will in turn cut a check to the Troop/Group upon receipt of contribution and send to the Troop/Group Leader listed below. Please allow 4-6 weeks for processing. **Please note:** If the completed form is not received with the donation, the contribution will remain with the Council.
- NOTE: All other (non-matching) donations are to be made payable and sent directly to the Troop/Group. For gifts in excess of \$250 payable to younger girl Troops/Groups or in excess of \$1,000 payable to older girl Troops/Groups the overage **MUST** be sent to Council along with a completed copy of this form and a copy of the original check.
- For all gifts to a Troop/Group of any amount, the Troop/Group is responsible for generating the 'donor thank you' letter (IRS regulations) and to keep a copy of each thank you letter on file above \$250. A donor 'thank you' letter template can be found on the GSGLA Web site (www.girlscoutsla.org) under **Support Us, Ways to Give**.

Donation made to Troop/Group:

Troop/Group Leader Full Name: _____ Phone: () _____ ext _____

Troop/Group Leader Email _____

Troop/Group Leader Address: _____ City _____ St _____ Zip _____

Troop/Group Level (circle one): Daisy Brownie Junior Cadette Senior Ambassador

Donor/Organization info:

Donor/Organization Name: _____

Contact Person: _____ Phone: () _____ - _____ ext. _____

Donor Address: _____ City _____ ST _____ Zip _____