

JULIETTE PROGRAM CREDIT REIMBURSEMENT FORM

(To be reimbursed for Girl Scout expenses, please submit the following with this form)

Juliette Number: (if applicable)	Date: Girl Scout Name:				
Address:	Juliette Number: (If applicable) Grade:	Grade:		
Phone: Email: DESCRIPTION OF GIRL SCOUT ACTIVITY AND LIST ITEMIZED EXPENSES: \$ AMOUNT OF RECEIPT(S) SUBMITTED Check box if you are joining a troop and are submitting your Juliette Program Credits to be given to your new troop. \$ AMOUNT OF JULIETTE PROGRAM CREDITS SUBMITTED Please indicate the amounts to be reimbursed. Juliette Parent/Guardian Reimbursement Check (please allow at least four weeks for processing) Made payable to "Parent/Guardian of GIRL NAME" and mailed to the address listed on this form unless otherwise specified. EMAIL COMPLETED FORM AND REQUIRED DOCUMENTATION (E.G. RECEIPTS) TO: Email: info@gsgst.org Subject line: ATTN:JPC Reimbursement Form For office use only: Check Amount: Girl Scouts of Greater South Texas Approval	Parent/Guardian Name:				
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