



### Bank Account and ACH Agreement

**TO BE COMPLETED BY TROOP LEADER – COMPLETE and SUBMIT FORM ANNUALLY TO MEMBERSHIP SPECIALIST**

Return this form to Girl Scouts of Central Illinois (GSCI) **within two weeks** of opening an account, or any time signers' change or the bank account information changes. *Retain a copy for your records and annual review.*

**Account Information Troop # \_\_\_\_\_ Service Unit # \_\_\_\_\_**

**Check this box if your banking information is the same as the last time you submitted your ACH Agreement. Complete the shaded items. (THANK YOU)**

**(If this is a new form or your banking information has changed, please complete the entire form. THANK YOU)**

Name of Financial Institution \_\_\_\_\_ Branch \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

ACH/Routing #(nine digits) \_\_\_\_\_ Account Number \_\_\_\_\_

Attach voided check or deposit slip(needs to include above info)or place below, copy &complete

Girl Scout funds must be deposited in a non-interest-bearing **checking** account using the Federal Tax Identification Number 37-0681529 under the name of **Girl Scouts of Central Illinois Troop # \_\_\_\_\_** using a **leaders address** (not council).

Two unrelated registered and background checked Girl Scout adults affiliated with the troop/group shall be authorized signers on the account, but only one signature shall be necessary to withdraw funds. The Council will provide this Bank Account and ACH Agreement annually or when opening or making changes to a Girl Scout account.

By signing below we agree to the following statements and verify that we are registered Girl Scouts and authorized signers on the account listed above. We understand this account is only for the purpose of Girl Scouts and is not for personal use. We understand that GSCI will have access to all records pertaining to this account and the authority to close this account when in the best interest of the troop or GSCI. We hereby authorize GSCI to initiate debit and credit entries and if necessary, correction and adjustment entries to the account at the financial institution listed. GSCI will inform your troop about any transactions made.

Print Name \_\_\_\_\_ Print Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City,State, ZIP \_\_\_\_\_ City,State, ZIP \_\_\_\_\_

Phone ( ) \_\_\_\_\_ - \_\_\_\_\_ Phone ( ) \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_ Email \_\_\_\_\_

**ONLY ONE SIGNATURE NEEDED** \_\_\_\_\_ **Date** \_\_\_\_ / \_\_\_\_ / \_\_\_\_