



Service Unit # \_\_\_\_\_ Troop # \_\_\_\_\_

### 2018 ACH Cookie Adjustment Request Form

Please submit this completed Adjustment Request Form by emailing it to [ACH@gswpa.org](mailto:ACH@gswpa.org), faxing it to (814)536-5373 or mailing it to Director of Product Sales, 612 Locust Street, Johnstown, PA 15901, no later than five business days before the scheduled transaction. Requests received after the deadline will not be processed in time to stop or adjust the sweep.

**Sweep:**

1<sup>st</sup> SWEEP  
2<sup>nd</sup> SWEEP

**Sweep Date:**

Thursday, March 15, 2018  
Thursday, March 29, 2018

**Submit this form by:**

Thursday, March 8, 2018  
Thursday, March 22, 2018

Troop Cookie Manager: \_\_\_\_\_

Troop Leader: \_\_\_\_\_

Today's Date: \_\_\_\_\_

**Reason for Adjustment Request:**

- I am having problems with parent debt. Please include parent's name(s) below and, for the 2<sup>nd</sup> sweep, mail in the Delinquent Cookie Money Form and supporting documentation. (Until the Delinquent Cookie Money form and supporting documentation is submitted for a girl/parent with an outstanding balance due to the troop, the troop is financially responsible for the cookies.)
- Other: Please write a specific explanation below.

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**Amount GSWPA can safely debit from your account: \$** \_\_\_\_\_

If delinquent funds are received after the 2<sup>nd</sup> sweep, the troop should submit a check (indicate the delinquent girl in the memo line) to GSWPA, Attention: Cookie Sales Coordinator, 5681 Route 6N, Edinboro, PA 16412.

Signature: \_\_\_\_\_

Position: \_\_\_\_\_

Phone: \_\_\_\_\_