

BOY SCOUTS OF AMERICA GRAND CANYON COUNCIL

AUTHORIZED PERSONS TO DRAW UNIT FUNDS FOR SCOUT SHOP PURCHASES

PACK TROOP TEAM CREW EXP
_____ # _____ # _____ # _____ # _____

PRINT NAME

SIGNATURE

If the Committee Chair or Chart. Org. Rep. wish to be signers, they must also sign and print above.

COMMITTEE CHAIR OR CHART. ORG. REP. PRINTED NAME

COMMITTEE CHAIR OR CHART. ORG. REP. SIGNATURE

ADDRESS

CITY STATE ZIP

PHONE # ____ / ____ / _____

EFFECTIVE DATE ____ / ____ / _____

CC OR CR EMAIL _____

CHART. ORG. _____

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