

MONEY MANAGER POSITION AGREEMENT/BANK REQUEST INSTRUCTIONS

- Each signer must have **CURRENT MEMBERSHIP** with GSSWT. *Membership is renewed yearly, and expires on September 30 of each year.* To register or renew membership, please contact the Customer Care team at: customercare@girlscouts-swtx.org or at 210-349-2404, extension 391.
- Each signer **being added** must have successfully completed **MONEY MANAGER TRAINING** *within the past 12 months.* If you have not completed Money Manager Training, you can access the training from the [Adult Learning](#) page on the GSSWT website, under “Managing Finances”.
- Each signer must have a **CLEAR AND CURRENT BACKGROUND CHECK** on file with GSSWT. *Background checks expire three years after completion date.* To order a background check, please contact the Customer Care team at customercare@girlscouts-swtx.org or at 210-349-2404, extension 391.
- Each signer **being added** must complete a **MONEY MANAGER POSITION AGREEMENT** form to acknowledge that he/she:
 - ❖ has completed training
 - ❖ is familiar with the requirements of the position
 - ❖ agrees to follow the policies and procedures outlined in the training materials

Please *carefully review* each line item on the Money Manager Position Agreement (MMPA) and initial in the blank next to it to indicate agreement.

1. Complete **pages 1 and 2** of the MMPA and **pages 1 and 2** of the Bank Request form.
2. Money Managers must *hand sign* each form in the “Signature” section.
3. Submit *both forms together* (4 pages total) to customercare@girlscouts-swtx.org.
4. Do not go to the bank until you have been contacted by a bank representative.
5. *After* you have completed signature cards at the bank, the primary signer must send the *ACH Authorization* form to customercare@girlscouts-swtx.org.

IMPORTANT:

PLEASE DO NOT SUBMIT THE ACH AUTHORIZATION FORM AT THIS TIME.

ACH FORM IS NOT VALID UNTIL ALL SIGNATURE CARDS HAVE BEEN COMPLETED AT THE BANK.

Name: _____
Troop #(leave blank if CMM): _____
Community: _____

YOU MUST HAVE COMPLETED MONEY MANAGER TRAINING WITHIN THE PAST 12 MONTHS BEFORE SUBMITTING THIS FORM

Money Manager Position Agreement

Purpose: All account signers are **Money Managers**, responsible for maintaining accurate records and submitting required reports for all money earned or spent by the Troop/Community (Group).

By initialing each line, I agree to the following:

I have successfully completed money manager training within the past 12 months, and will ensure that my training is kept current by renewing at least every three years, or as changes require.

I will ensure that my Girl Scouts of Southwest Texas (GSSWT) membership and background check are kept current. I understand that *GSSWT membership expires on September 30 of each year*, and background checks expire three years from activation date.

I understand that the group account must have at least two qualified signers at all times. Signers cannot be related by blood or marriage, and cannot reside in the same household. **I understand that accounts without at least two qualified signers are subject to closure without notice.**

I understand that I am not authorized to open, modify or close the account directly with the bank. If a signer leaves the group or becomes disqualified, I will immediately notify GSSWT to add a new co-signer. If my group disbands, I will ensure that GSSWT is properly notified to close the bank account, and that my group submits a final finance report within 30 days of receiving the final bank statement.

I understand that group accounts are established under the GSSWT tax ID number, and are therefore property of GSSWT and subject to its guidelines and requirements.

I understand that **all account signers** are responsible for reviewing monthly bank statements and otherwise monitoring the account. Discrepancies are to be reported to GSSWT immediately.

I understand that group account signers must not write checks to themselves. One signer may write a check to the other signer for reimbursement. All reimbursements require a valid vendor receipt.

I understand that the only Third-Party Settlement Organization (TSO) accounts permitted on the group account are "Square", to be used for Product Program transactions, and "Stripe", which is available through [Rallyhood](#). The "Stripe" account is to be used to *receive* funds only. Other TSO vendors (Venmo, PayPal, ApplePay, etc.) are not permitted.

I understand that **cash withdrawals are not permitted from the group account.** Withdrawing cash from the group account may result in my being released as a volunteer, and could possibly result in GSSWT filing criminal charges.

I understand that **use of this account for personal purchases is not permitted.** Using the group account for personal expenses may result in my being released as a volunteer, and could possibly result in GSSWT filing criminal charges.

I understand that **electronic transfers out of the account are not permitted.** *All outgoing transactions must be made by check or debit card.*

I have been instructed in the proper use of the Sales Tax Exemption form, as part of my money manager training, and will train and encourage the adults in my group to save group funds by using the form for Girl Scout activity-related purchases.

I am aware of the guidelines regarding the Auto-Withdrawal ACH Authorization form, and understand that my group must keep a current ACH form on file with GSSWT in order to participate in the Fall Product and/or Cookie Program.

I have been instructed on the money-earning and solicitation policies of GSSWT, as part of my money manager training, and will abide by these policies. The Development Department must pre-approve all solicitations valued at \$250 or more. I understand that all in-kind (non-monetary) donations must be reported to GSSWT.

I understand that **finance reports are due twice a year, by December 15th and by June 15th**. I will ensure that my troop/group report is submitted on time and complete, even if there was no activity on the account during the reporting period. The report will include the completed and signed cover sheet, income and expenses spreadsheets, copies of bank statements and copies of receipts.

I understand that *failure to submit my troop/group finance report by the due date may result in closure of the account without notice*.

I understand that group funds belong to the entire group and not to any one individual or collection of individuals within the group. Funds remaining in the account after disbanding become property of GSSWT.

I understand that, except for reimbursement with a valid receipt, **group funds are not to be paid directly to any individual, either in the form of cash or gift cards**.

Bank statements and the most recent finance report will be made available to group members and/or to girls' caregivers for review during each group meeting and at any time upon request. I understand that financial transparency is crucial.

I understand that failure to submit finance reports and maintain a bank account in good standing jeopardizes my group's participation in the product program, and prevents my group from conducting its own money-earning/solicitation projects or receiving donations.

I realize that the money manager training materials and required forms, as well as the most recent edition of the "Managing Troop/Group Finances" manual, are available for me to download from the GSSWT website for reference at any time.

COMMUNITY MONEY MANAGER ONLY: I am responsible for supporting Troop Money Managers by partnering with GSSWT to guide them in correct council money manager procedures. I will be available to answer their questions and provide assistance as needed.

Method of Selection: Selected and appointed by the group.

- Accountability:**
- Troop Money Managers report to Troop Leader and Community Money Manager
 - Community Money Manager reports to Community Chair

Term: Will remain in position until removed from account.

I acknowledge and accept the responsibilities as set forth in this volunteer position description.

Printed Name

Date: _____

Signature

Email address: _____

Bank Request Form

PLEASE DO NOT SUBMIT THE ACH AUTHORIZATION WITH THIS FORM

I/we need to:

- Open a new account
- Add signer(s) - account # _____
- Remove signer(s) - account # _____
- Close account # _____

**Check
Bank:**

- Broadway Bank
- First State Bank of Uvalde
- IBC
- First Commercial Bank
- Frost
- The Bank and Trust

Bank branch location preferred for signing documents: _____ Troop #: _____

ATTN Bank Personnel:

We are requesting that your banking facility fulfill this request for
Girl Scouts of Southwest Texas (GSSWT).

This form must be received directly from Girl Scouts of Southwest Texas by authorized email.

Please do not process this request without additional cover letter containing GSSWT executive signature.

Note:

Account name should be: *Girl Scouts of Southwest Texas Troop* _____

No wire transfers may be made from this account.

Per agreement with GSSWT, please waive monthly service charge.

The account must have at least two unrelated signers. The signers on this account will be:

SIGNER	NAME	POSITION
Primary Signer (required)	PLEASE PRINT	MONEY MANAGER
2 nd Signer (required)	PLEASE PRINT	MONEY MANAGER
3 rd Signer (optional)	PLEASE PRINT	MONEY MANAGER
4 th Signer (optional)	PLEASE PRINT	MONEY MANAGER

Bank Request Form Troop #: _____

(Primary Signer): Only one signer should complete the "Primary Signer" section
(Bank statement will be mailed to the Primary Account Signer)

Name: _____ Signature: _____

Street address: _____ City: _____ Zip: _____

Home #: _____ Cell #: _____ Email: _____

COUNCIL USE ONLY:

MMPA: _____ CBC: _____ MMT: _____

Signer Two: ADD REMOVE

Name: _____ Signature: _____

Street address: _____ City: _____ Zip: _____

Home #: _____ Cell #: _____ Email: _____

COUNCIL USE ONLY:

MMPA: _____ CBC: _____ MMT: _____

Signer: ADD REMOVE (Signer contact information and signature not required to remove from account.)

Name: _____ Signature: _____

Street address: _____ City: _____ Zip: _____

Home #: _____ Cell #: _____ Email: _____

COUNCIL USE ONLY:

MMPA: _____ CBC: _____ MMT: _____

Signer: ADD REMOVE (Signer contact information and signature not required to remove from account.)

Name: _____ Signature: _____

Street address: _____ City: _____ Zip: _____

Home #: _____ Cell #: _____ Email: _____

COUNCIL USE ONLY:

MMPA: _____ CBC: _____ MMT: _____

(ATTN BANK: DO NOT PROCESS THIS REQUEST WITHOUT AUTHORIZED GSSWT EXECUTIVE SIGNATURE)