GSNEO Bank Account Signer Agreement

As a signer on the Girl Scouts of North East Ohio (GSNEO) troop bank account, I acknowledge and agree to the following:

- I understand that all funds in the troop bank account belong to the Girl Scouts of North East Ohio, and that I have been appointed as a steward of those funds.
- I understand that these funds must be used solely for the benefit of the troop and its members, in alignment with GSNEO Volunteer Policies.
- I acknowledge my fiduciary duty to safeguard these funds and ensure they are managed responsibly and honestly.
- I agree to deposit all funds received on behalf of the troop immediately into the designated troop bank account.
- I will maintain accurate and complete documentation of all receipts, disbursements, and financial transactions.
- I will only authorize expenditures that are directly related to the troop's activities and in compliance with GSNEO guidelines.
- I will make bank statements, receipts, checks, and financial records available to all troop members and their parents/guardians at meetings upon request.
- I will provide all financial reports and documentation requested by GSNEO in a timely and accurate manner.
- I understand and agree that misuse of troop funds, including but not limited to personal use, unauthorized withdrawals, or failure to provide required financial documentation, constitutes a breach of this agreement and GSNEO policies.
- I understand that any misuse of troop funds may result in my being held personally liable by GSNEO for reimbursement of those funds.
- I understand that GSNEO reserves the right to pursue all available legal remedies, including but not limited to civil litigation, to recover misused funds. I further understand that GSNEO may report suspected financial misconduct to law enforcement authorities.
- I acknowledge that GSNEO may remove me as a signer on the troop bank account at any time and may terminate my volunteer role for violations of this agreement.
- If I have any questions or concerns regarding the management of troop funds, I will promptly contact my service unit team, my CME, or the GSNEO Finance Department for guidance.
- By signing below, I affirm that I have read, understood, and agreed to the terms outlined above. I acknowledge my responsibilities and accept accountability for the proper management of troop funds.

| Гroop # | Signature Signer 1 Date | | | |
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| 1 | r local service area o | office, or the Fin | ance Departmen | t at | |
| pkirik@gsneo.or | <u>·g</u> . | | | | |

a family member) and do not live in the same residence.

By checking this box, we confirm that the signers listed here are not related (i.e. not a sibling, spouse, domestic partner, parent, child, or anyone who would be considered