



Region: _____

Troop #: _____

Program Name: _____
Fall/Cookies Date

Girl to Girl Product Shuffle

Transfers may be made within your troop only.

Before you shuffle any boxes in the system, 1) PRINT both the gifting girl's original balance summary report and the receiving girl's original balance summary report. Then, 2) complete this shuffle form and attach it to the printed reports. 3) Both parents must sign their girl's original balance summary reports 4) as well as this shuffle form prior to the 5) shuffle taking place in the sales system. 6) You MUST turn these reports with signatures in at paper push.

I _____ am gifting _____ to _____.
Gifting Girl's Name \$ for Fall / # of boxes for Cookies Receiving Girl's Name

Gifting Girl: I understand that by gifting product, my reward level may be altered and I may receive fewer rewards. I may also lose a chance to be top seller.

Girl Signature: _____ Parent Signature: _____ Date: _____

Receiving Girl: I understand that anything gifted to me will not count towards my chance at being a top seller.

Girl Signature: _____ Parent Signature: _____ Date: _____

White: Council Yellow: Troop
Girl Scouts of San Geronio Council, 1751 Plum Lane, Redlands, CA 92374 • 800-400-GIRL • www.gssgc.org
S/Product Sales/Forms/Girl to Girl Shuffle Form 2018



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