

FRIENDS OF SCOUTING UNIT CAMPAIGN REPORT

Date: _____

Unit Leader Name*: _____ Daytime PH: _____ e-mail: _____

Unit Leader Full Address: _____ City _____ ST _____ Zip _____

FOS Chairman Name _____

District _____ Pack _____ Troop _____ Team _____ Crew _____ Post _____

Only list contributors for which a pledge card or a Matching Gift Form is attached.*

#	CONTRIBUTOR'S NAMES	TOTAL GIFT		AMOUNT PAID (Check, CCard, Cash)		BALANCE DUE		RECOGNITION GIFT (Y/N)
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
TOTALS FOR EACH COLUMN								

* Matching Gift Forms are obtained from a contributor's employer. Once form is completed, they should be mailed to Longs Peak Council, BSA -

PO Box 1166 - Greeley, CO 80632-1166

Unit FOS Target Certification - Staff Use Only

Camp Target: _____ Patch Target: _____	Report Checked: _____ <small>(Staff Initials)</small>	Date: _____
Camp Discount Target Achieved: _____ Yes _____ No	_____ <small>Professional Staff Signature/Date:</small>	
Patch Discount Target Achieved: _____ Yes _____ No	_____ <small>Professional Staff Signature/Date:</small>	

WHITE COPY - COUNCIL YELLOW COPY - DISTRICT PINK COPY - UNIT

* This is who the incentive letter will be sent to once target is achieved. Preferably by email if you have an email address.