

## Launch an Eagle **Annual Giving** Transmittal Report

Pack, Troop, Team, Crew, Ship # \_\_\_\_\_

Presentation Date \_\_\_\_\_

Presenter Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Unit Coordinator: \_\_\_\_\_

Were all families asked to give? Y / N

Below list all donors and the amounts pledges and paid

**Return this form to the Scout Service Center with all pledge cards and payments attached**

	Donor Name	Scout Name	Pledge Amount	Paid Amount	Recognition Given		
					Lapel	Patch	Reception
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							

TOTAL                      \$                      \$ \_\_\_\_\_

FOS Representative \_\_\_\_\_

Unit Coordinator \_\_\_\_\_

Office: \_\_\_\_\_