**Unit-to-Unit Exchange of Cookies**

***Unit Providing Cases – Please complete this portion of the form***

**Unit Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Unit iMIS #:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Unit Banking ID #:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Guider Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Guider Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Guider iMIS#:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Number of Cases:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Anticipated Cost per case (circle one) $46.25 $46.75 $47.25 $47.75 $48.50 $49.00**

(Cost per case is dependent on # cases per girl – provincial invoice will confirm actual case cost)

**Anticipated Total amount to receive (Cost x No. of cases):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(to be confirmed after invoice date)

**Date of Pick-up:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞏 I confirm that the cases I am providing are in good condition and have been stored in a clean, cool location during the current campaign. I have verified the “no sell date” and confirm that these cases are still sellable.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Guider’s Signature Date

***Unit Receiving Cases – Please complete this portion of the form***

**Unit Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Unit iMIS #:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Unit Banking ID #:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Guider Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Guider Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Guider iMIS#:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Number of Cases:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Anticipated amount to transfer (to be confirmed after invoice date):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please refer to [Quick Tip 17](https://www.girlguides.ca/WEB/Documents/ON/Finance/unit_banking_quicktip_17.pdf) – How to complete a Unit-to-Unit transfer for cookies.

**Date of Pick-up:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞏 I confirm that the cases I have been provided with are in good condition and based on their “no sell date”, are still sellable. I agree that by receiving these cases, my unit accepts full responsibility for the proper storage, sale and payment of these cookies. I also agree to complete a unit-to-unit transfer of funds for the agreed amount 5 days prior to cookie payment.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Guider’s Signature Date