Girl Guides Queensland

CASHBOOK

Support Group and District Support Team







Cashbook Support Group and District Support Team

QP.FI.15

Girl Guides Queensland Cashbook for Support Groups and	3. Signatories
District Support Teams.	Signatories as of Date
1. Cashbook Details	Persons authorised as Signatories are any two of:
	1. District Leader
Support Group/District Team	2.
	3.
From Year	4.
To Year	
	Signatories as of Date
2. Account Details	Persons authorised as Signatories are any two of:
Bank	1. District Leader
Branch	2.
BSB	3.
Account Number	4.
Notes	



vistrict				For Period	From						
SG/DST					6						
,	1	Receipt	•	Total						S	Sundries
Date	Received From	Number	Amount \$	Banked						Amount	Detail
Brought forward from 1 January or previous page											
TOTALS											
Carry Forward to Next Page Totals from all Columns	age Totals from all	Columns			\$ on this si	\$ on this side should agree with amount column	e with amou	nt column			Total each column



QF.FI.19 **12**

SG/DST District Balance as per cash book 1 Jan previous page Brought forward from TOTALS Date Paid To Cheque Number **Amount \$** For Period Balance as per Bank Statement From 7 8 Amount Sundries Detail

Balance as per cash book

Total

⇔ ⇔ ⇔

Balance as per cash book

Total

\$ \$

\$

Deduct Outstanding Cheques #

Add Outstanding Deposits

Deduct Payments



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SG/DST					6						
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Deduct Outstanding Cheques #

Add Outstanding Deposits

Deduct Payments



GIRL GUIDES
AUSTRALIA
QUEENSLAND

Cashbook Receipts Support Group/District Support Team

District				For Period	From						
SG/DST					То						
5		Receipt	3	Total						S	Sundries
Date	Received From	Number	&mount \$	Banked						Amount	Detail
Brought forward from 1 January or previous page											
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Total

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Balance as per cash book

Total

\$ \$

\$

Deduct Outstanding Cheques #

Add Outstanding Deposits

Deduct Payments

Petty Cash

Desirion Decision Total Total Total Hand Total Total Hand Total Total Total Hand Total Total Hand										
Data Details Amount \$	District			For Perio	d From					
Date is Details Amount \$ Introduction Contail Contai	Unit				ъ П					
Amount Detail Iodal	,	2	•				Sı	ındries	•	Cash on
	Date	Details	Amount \$					Detail	lotal	Hand
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SG/DST Payment Request

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This form is to be used to authorise a payment of Support	2. Payment Request
Group/District Support Team expense.	Cheque payment requested by
Date	Name
District	Signature
1. Expense Details	Signature
Payment requested on behalf of	Date
Maintenance Uniforms Fundraising	COMMITTEE LISE ONLY
Other	COMMITTEE USE ONLY Cheque Approval must be SG/DST Exec member
Cost \$	Name
Supplier of Goods	Signature
Supplier of Goods	Date
Address	Date
	SG/DST Treasurer
Postcode	Date Raised
Cheque payable to	Cheque Number Amount \$
Supplier of goods as above	Cheque raised by
Other	Co-signed by
γ QUEENSLAND	ayment Request 10
This form is to be used to authorise a payment of Support Group/District Support Team expense.	2. Payment Request
Date District	Cheque payment requested by
	Cheque payment requested by Name
1. Expense Details	Name Signature
Expense Details Payment requested on behalf of	Name
1. Expense Details Payment requested on behalf of Maintenance Uniforms Fundraising	Name Signature
Expense Details Payment requested on behalf of	Name Signature Date
1. Expense Details Payment requested on behalf of Maintenance Uniforms Fundraising	Name Signature Date COMMITTEE USE ONLY
1. Expense Details Payment requested on behalf of Maintenance Uniforms Fundraising Other	Name Signature Date COMMITTEE USE ONLY Cheque Approval must be SG/DST Exec member
1. Expense Details Payment requested on behalf of Maintenance Uniforms Fundraising Other Cost \$	Name Signature Date COMMITTEE USE ONLY Cheque Approval must be SG/DST Exec member Name
1. Expense Details Payment requested on behalf of Maintenance Uniforms Fundraising Other Cost \$	Name Signature Date COMMITTEE USE ONLY Cheque Approval must be SG/DST Exec member Name Signature Date
1. Expense Details Payment requested on behalf of Maintenance Uniforms Fundraising Other Cost \$ Supplier of Goods Address	Name Signature Date COMMITTEE USE ONLY Cheque Approval must be SG/DST Exec member Name Signature Date SG/DST Treasurer
1. Expense Details Payment requested on behalf of Maintenance Uniforms Fundraising Other Cost \$ Supplier of Goods	Name Signature Date COMMITTEE USE ONLY Cheque Approval must be SG/DST Exec member Name Signature Date
1. Expense Details Payment requested on behalf of Maintenance Uniforms Fundraising Other Cost \$ Supplier of Goods Address	Name Signature Date COMMITTEE USE ONLY Cheque Approval must be SG/DST Exec member Name Signature Date SG/DST Treasurer Date Raised
1. Expense Details Payment requested on behalf of Maintenance Uniforms Fundraising Other Cost \$ Supplier of Goods Address Postcode	Name Signature Date COMMITTEE USE ONLY Cheque Approval must be SG/DST Exec member Name Signature Date SG/DST Treasurer Date Raised Cheque Number



Receipts and Payments Summary

Support Group/District Support Team

QF.FI.10

This form is to be completed by the Support Group/District Support Treasurer to report an annual financial summary to Girl Guides Queensland.

This form is to be completed in duplicate. One copy to be held by the District and one copy for the Support Centre.

Support Centre copies must be received by the 30 April

each year.	oo Aprili
1. Receipts and Payments	
Balance at 1 January	\$
Receipts	
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Total Receipts	\$
-	
Payments	
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Total Payments	\$
Balance at 31 December	\$
Bank reconciliation at 31 December	\$
Balance as per bank statement 31 December	\$
Add deposits not credited	\$
Less outstanding cheques	\$
Balance as per cash book 31 December	\$
,	L .

Financial Year
1 January 31 December
District
Support Group District Support Team
Region
2. Bank Account Details
Name of bank the account is held with
Account Name
BSB
Account Number
Account Signatories print name
1.
2
2 Cartification - 1
3. Certification To be signed prior to audit As SG/DST Treasurer, I certify these records are correct
Name
Signature
Date
As SG/DST President, I have sighted these records
Name
Signature
Date
As District Leader, I have sighted these records
Name
Signature
Date
4. Auditors Certificate
I have examined the accounts of
and have obtained all the information and explanations required. In my opinion the Statement is properly drawn up so as to give a true and fair view of the movement in the account during the year.
Name
Signature
Date