



Cookie Dough Redemption Form for SU Event

844.476.4787 • www.gsmists.org

Please submit form to GSMISTS customercare@gsmists.org.
Prior approval is needed. *Cookie Dough amount used per girl may not exceed event cost.*
Allow 4 weeks for processing.

Form Submitter Name _____

Phone #/Email address _____

EVENT INFORMATION

Name of Event and SU _____

Treasurer _____

City _____ State _____ Zip _____

(This is where the check will be sent for reimbursement)

Date of Event _____

Cost of Event _____

COOKIE DOUGH INFORMATION

Name of Girl _____ Troop # _____

Cookie Dough Number _____

Dollar Amount requested from Cookie Dough \$ _____