

Girl Scouts of Southern Illinois has a great opportunity that we would like to extend to all Service Units and Troops. We are now using services provided by CHECKredi as part of our collections process. While you are under no obligation to enroll in this program we think that it will greatly benefit your Service Unit or Troop in helping to collect the money owed to you. We strongly encourage you to take advantage of this service.

CHECKredi offers a program that guarantees full face value reimbursement of *qualified* checks whether they collect on the check or not. It is a free, no-cost service that they have agreed to extend to our Service Units and Troops.

### **Checks Guaranteed**

All checks up to a maximum of \$250.00 will be reimbursed at 100% of face value whether the check has been collected or not. This includes checks that are returned for insufficient funds. Any checks returned with a face value greater than \$250.00 will be reimbursed at 100% of the face value upon collection.

## **Service Charge Sharing**

CHECKredi will charge the check writers, the state allowed service charge, of \$30.00 per check. For each service charge collected from the check writer CHECKredi will pay the Girl Scout SU or Troop \$5.00, in addition to the face amount of the check.

### **Guarantee Requirements**

The following requirements **MUST** be present on each check to qualify for this program.

- Name
- Physical Address
- Phone Number
- Driver's License Number

### **Implementation**

The following forms must be completed and turned into GSSI to enroll in this program.

- Girl Scout Program Agreement
- Bank Mail Release Authorization
- Check or Direct Deposit of Recovered Funds Election

A CHECKredi customer service representative will be assigned to assist the SU or Troop contact person with the implementation of their services. For more information on CHECKredi, go to checkredi.com or call Casey Weems or Nikki Bartlett at 800-686-9522.



## CHECKredi Enrollment and Participation FAQ's

- What forms does the troop or service unit need to complete?
  - Complete the Girl Scout Program Agreement form, the Bank Mail Release Authorization form and the Authorization for Direct Deposit form. Troops and Service Units should forward these forms to the Council office attention Accounting.
- Who is responsible for completing the CHECKredi forms?
  - The person who is responsible for the Troop or Service Unit treasury should complete the enrollment forms. Sample forms are available from your membership staff and will be available along with other troop forms on the council website.
- Where do I send the forms?
  - You may send the forms directly to GSSI, Attention Accounting for the speediest processing.
     You may also turn them in to your service unit. However, the sooner your account information is received and processed by CHECKredi, the sooner your protection starts.
- Does CHECKredi contact the bank once the troop or service unit signs up?
  - Yes, CHECKredi will forward the Bank Mail Release Authorization form to the troop or service unit bank.
- How long must the troop or service unit be enrolled before accepting checks?
  - Ocuncil will forward enrollment forms to CHECKredi who will process them as quickly as they can. CHECKredi will notify you once this process is completed. You may continue accepting checks as you have in the past. However, your protection does not begin until CHECKredi receives and processes the completed paperwork. Immediately, you should start encouraging the inclusion of the required information on every check you accept. (See next bullet point.)
- When accepting checks written to your troop or service unit, provide the following information on the face of the check (also known as "the required information"):
  - o Name
  - o Physical Address a PO Box does not constitute "required information"
  - Phone Number

This information can be handwritten on the face of the check!

- o Driver's License Number
- Checks in the amount of \$250.00 or less which are returned for insufficient funds (NSF), account closed, or refer to maker issues <u>and</u> have the required information on the face of the check, will be reimbursed to the participating account.
- Checks in the amount of \$250.00 or less which are returned for insufficient funds (NSF), account closed, or refer to maker issues <u>but do not</u> have the required information on the face of the check, will only be reimbursed upon collection to the participating account.
- Checks over \$250.00 will still be pursued for collection by CHECKredi. However, these checks are not reimbursed until collected by CHECKredi.
- CHECKredi processes payments on the 1<sup>st</sup> and 15<sup>th</sup> of the month. To avoid time delays for mailing, you may request direct deposit to the Troop or Service Unit account on the Check or Direct Deposit of Recovered Funds Election form.



Use these sample forms and instructions to enroll your troop or service unit in the CHECKredi returned check service.

Item#	Description/Instruction
1-5	Complete this section with information found on your troop or service unit bank
	statement or signature card. This should match the title on the bank account you are
	enrolling. Be sure to print the information for one authorized signer to receive
	correspondence from CHECKredi.
1	Name or title on the troop or service unit bank account
2-3	Mailing address for the troop or service unit bank account
4	Printed name of an authorized signer on the troop or service unit bank account –
	probably the person who receives the bank statements.
5	Phone number and fax number for the authorized signer on the troop or service unit
	bank account listed in item 4. It is okay if you do not have a fax number.
6	Provide the email address of the authorized signer listed in item 4. It is okay if you do
7	not have email.
7	Use the date you are completing the form.
8	Use "1". The troop or service unit enrollment is only for one location.
9	When used on this form, you may define the word "Council" to mean "Troop" or "Service Unit" depending on the account information you are providing. You are
	"Service Unit" depending on the account information you are providing. You are establishing an agreement with CHECKredi and they will correspond with you
	concerning activity on your troop or service unit bank account based on the
	information you provide. Do not make any changes to the check boxes in this section
	of the agreement.
10	Signature of authorized signer listed in item 4.
11	Printed name of authorized signer whose signature is in item 10.
12	Leave this blank. A CHECKredi representative will complete this.
13	Leave this blank. A CHECKredi representative will complete this.
14	Print the name of the BANK of the troop or service unit account.
15	Print the complete address of the BANK of the troop or service unit account. This
	includes mailing address, city, state and zip code of the bank.
16	Insert the phone number for the BANK including area code.
17	Insert the fax number for the BANK including area code.
18	Leave blank. CHECKredi will assign this client number when they receive the
	completed paperwork.
19	Provide the person's title (such as troop leader, troop treasurer, service unit director,
	etc.)



Item#	Description/Instruction
20	Printed name of a different authorized signer on the Troop or Service Unit account.
	This may be a co-leader or service unit director.
21	Signature of authorized signer in item 20.
22	Provide the person's title (such as troop leader, troop treasurer, service unit director,
	etc.) associated with the name in items 20 & 21.
23	This information is encoded on the Troop or Service Unit account checks. The routing
	number is the set of digits on the bottom left. If you have any doubts about what
	numbers to place here, your bank can help you with providing this information.
24	This information is encoded on the Troop or Service Unit account checks. The
	account number is the next set of digits to the right of the routing number. If you have
	any doubts about what numbers to place here, your bank can help you with providing
	this information.
25	The troop may choose to receive a paper check or direct deposit of guaranteed
	amounts, non-guaranteed recoveries, and service charge share. Place an "X" in the
	box in front of the option you choose.
26	Attach a voided check from the Troop or Service Unit checking account.

# GIRL SCOUT PROGRAM AGREEMENT



SERVICE PROVIDED TO:				_	
GIRL SCOUT COUNCIL	on Campian Unit and	ount	1	• 406 Park Plac Phone: 1-800	re, Lexington, KY 40511
Name or title on the Troc	p or Service Unit acc	count	<u></u>	Fax: 1-859-2	
Mailing address for Troo	n or Service Unit acc	ount	2	• 4925 Sparkma Phone: 1-800	an Dr., Huntsville, AL 35810
CITY STA			_ <del></del>	Fax: 1-256-8	
Mailing address for Troo			[ 3 ]		
CONTACT NAME AND TITLE				-	[7]
Printed name of an autho	rized signer on the ac	count	4	Date:	<u> </u>
PHONE NUMBER	FAX NUMBER		5		8
Authorized signer's conta	act information		<u> </u>	_	FLOCATIONS 1
EMAIL Authorized signer's email	address	6		`	cation addresses, contact information ease authorization forms if multiple ced.)
CHECKredi Agrees to provide	the following services at <b>N</b>	10 CO	ST. 9 See th	e notes for inforn	nation about this section.
All returned checks are reimburg collected or not by CHECKredi				e by CHECKredi who	ether the check has been
	Account Closed	$\boxtimes$	Refer to Maker	☐ Stolen/Forged	
CHECKredi will guarantee chec face of the check:	ks written in the amount of	of \$ <u>250</u>	.00 or below, provid	ed that the following i	nformation is written on the
		$\boxtimes$	One Phone Number	er (including area code	2)
Physical Address (	No P.O. Box)	$\boxtimes$	Driver's License		
The Girl Scout Council will rece	ive detailed reports and re	mittano	ce of all funds due ea	ch payment cycle:	
Within 48 hrs	Weekly		Bi-weekly	Monthly	
These reports may be customiz at the Girl Scout Council reques check.					
If a check is returned that the G any time by approved contact pe		ther ha	ndle internally, the c	heck may be requested	d back via email or telephone a
All returned checks will be routed bank authorization form must a returned, along with information with additional letters. For each	ccompany agreement). Ean on how to pay for the ch	ch cust eck in f	omer will then be se full. If payment is no	nt a letter explaining to t received, a series of	he details on why the check wa phone calls will begin along
In consideration for the services check writer pursuant to <u>Illinois</u> checks.					
THIS AGREEMENT INCLUDES A EXECUTED ON BEHALF OF AND MULTIPLE COPIES EACH BEING I	BY THE AUTHORIZED MAN	NAGEM			
AGREEMENT ACCEPTED BY:	10		Leave b	lank	12
Authorized signer's signatu	Te To				
Authorized Signature				Representative Signature	
Printed name of authorized	signer 11		Leave b	lank	13

CHECKredi Representative Printed Name

Printed Name of Authorized Signature



#### GENERAL AGREEMENT PROVISIONS

Entire Understanding: This agreement represents the entire understanding and agreement between the parties with respect to the subject matter hereof, and supersedes all other negotiations (if any) made by and between the parties.

Amendments: The provisions of this agreement may not be amended, supplemented, waived or changed orally but only by a writing making specific reference to this agreement signed by both parties.

<u>Enforcement</u>: All of the terms and provisions of this agreement, whether so expressed or not, shall be binding upon, inure to the benefit of and be enforceable by the parties and their respective legal representatives, heirs, estates, successors and permitted assigns.

Notices: All notices, requests, consents and other communications required or permitted under this agreement shall be in writing (including faxed communication) and shall be (as elected by the person giving such notice) hand delivered by messenger or courier service, faxed, or mailed by Registered or Certified Mail (postage prepaid), Return Receipt Requested to the addresses reflect on the front of this agreement or to such other addresses as any party may designate by notice complying with the terms of this section. Each such notice shall be deemed delivered:

- (a) On the date delivered if by personal delivery,
- (b) On the date faxed if by fax, and
- (c) On the date upon which the Return Receipt is signed and delivery is refused or the notice is designated by the postal authorities as not delivered, as the case may be, if mailed.

Governing Laws: This agreement and all transactions contemplated by this agreement shall be governed by, and construed and enforced in accordance with, the laws of the State that the Girl Scout Council resides in without regard to principles of conflicts of laws.

Attorney's Fees: If any legal action or other proceeding, including arbitration, is brought by the enforcement of this agreement, or because of an alleged dispute breach, default or misrepresentation in connection with any provisions of this agreement, the successful or prevailing party or parties shall be entitled to recover reasonable attorney's fees, court costs and all expenses even if not taxable as court costs, incurred in that action or proceeding, in addition to any other relief to which such party or parties may be entitled.

<u>Counterparts</u>: This agreement may be executed in one or more counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same instrument.

<u>Survival of Covenant</u>: All covenants, agreements, representations and warranties made herein or otherwise made in writing by any party pursuant hereto shall survive the execution and delivery of this agreement and the consummation of the transactions contemplated hereby.

<u>Remedies</u>: No remedy herein conferred upon any party is intended to be exclusive of any other remedy, and each and every such remedy shall be cumulative and shall be in addition to every other remedy given hereunder or now or hereafter existing at law or in equity or by statute or otherwise. No single or partial exercise by any party of any right, power or remedy hereunder shall preclude any other or further exercise thereof.

<u>Severability Clause</u>: Provisions contained in this agreement which are contrary to, prohibited by or invalid under applicable laws or regulations shall be deemed omitted from this document and shall not invalidate the remaining provisions thereof.

<u>Waiver</u>: A failure to assert any rights or remedies available to a party under the terms of this agreement, or a waiver of the right to remedies available to a party by a course of dealing or otherwise shall not be deemed to be a waiver of any other right or remedy under this agreement, unless such waiver of such right or remedy is contained in a writing signed by the party alleged to have waived his other rights or remedies.

<u>Guarantee Exclusions</u>: All checks submitted by a Girl Scout Council will be excluded from the guarantee payment if anyone of the following conditions or circumstances are present:

- a) Checks that exceed the maximum dollar amount as stated on the agreement.
- b) Guarantee information is not present on the face of the check.
- c) Any more than two (2) outstanding checks from the same person or checking account number.
- d) Girl Scout Council has received full or partial payment in any form whatsoever to secure payment of check.

Non-Guaranteed Checks: CHECKredi agrees to reimburse 100% face value upon collection of all non-guaranteed checks. Girl Scout Councils shall be paid for collected non-guaranteed checks on their next remittance cycle.

## GIRL SCOUT PROGRAM AGREEMENT



To: Name of Troop or Service Unit Bank (Bank) Date: Today's date 7					
Address: Address, City, State, and Zip Code of the Bank					
Phone: Phone number for the Bank Fax: Fax number for the Bank 17					
Dear Bank Officer:					
I/We would like to change our current mailing address for all returned checks.					
I/We hereby authorize you to mail all returned items to:					
CHECKredi P.O. Box 11848 Lexington, KY 40578  Leave blank  18					
Client#: ► Must be listed on each debit.					
Please forward all unpaid items <b>immediately after the first presentation</b> to the CHECKredi address above. Please send a secondary notice to us at the address below. Include the maker's name, reason for return and amount of check for our records. This new address and authorization will continue to be in effect until otherwise changed.					
Your immediate attention and confirmation in this matter will be greatly appreciated.					
Sincerely, Authorized Signer:  Printed name of authorized signer  Title:  Signer's title					
Signature: Signature of check signer					
Authorized Signer:  Printed name of 2 <sup>nd</sup> authorized signer  Title:  2 <sup>nd</sup> Signer's title					
Signature: Signature of 2 <sup>nd</sup> signer					

Name or title on the Troop or Service Unit account

Mailing address for Troop or Service Unit account

Mailing address for Troop or Service Unit account

2

Authorized signer's fax (if available)

From the bottom of your check

BANK MAIL RELEASE AUTHORIZATION

Account Name:

City/State/Zip:

Authorized signer's telephone

From the bottom of your check

Address: \_

Phone:



	Check or Direct Deposit of Recovered Funds Election
Account Name: _	Name or title on the Troop or Service Unit account
Address:	Mailing address for Troop or Service Unit account 2
City/State/Zip:	Mailing address for Troop or Service Unit account
Phone: Authoriz	zed signer's telephone Fax: Authorized signer's fax 5
Our Troop  This authorizes C entries), electronic indicated below (entries.  Bank Name:	p or Service Unit elects to receive paper checks mailed to the above address.  p or Service Unit elects to receive direct deposit to the Troop or Service Unit bank account.  CHECKredi (the "Company") to send credit entries (and appropriate debit and adjustment ically or by any other commercially accepted method to the Girl Scout checking account the "Account"). This authorizes the financial institution holding the Account to post all sucleane of Troop or Service Unit Bank  14  14  15 Trom the bottom of your check  Please attach a voided check for the account here.
This authorization Service Unit.	n will be in effect until the Company receives written termination notice from the Troop or
Authorized Signe	Printed name of authorized signer  Title:  Check signer's title  Today's data