UNIT ACCOUNT AUTHORIZATION

Please make changes to current authorization as noted below and void all prior authorizations.

Date: _____

Circle Unit Type: Pack / Troop / Crew Unit Number: _____

Charter Organization: _____

List Updated by: _____ _____
(print name) (signature)

Position: _____

Phone #: _____

Email: _____

Please make the following changes to the Unit Account authorization list:

Name:	Circle Request	Require ID?
_____	Include / Remove	Yes / No
_____	Include / Remove	Yes / No
_____	Include / Remove	Yes / No
_____	Include / Remove	Yes / No
_____	Include / Remove	Yes / No
_____	Include / Remove	Yes / No
_____	Include / Remove	Yes / No
_____	Include / Remove	Yes / No
_____	Include / Remove	Yes / No
_____	Include / Remove	Yes / No