



Alberta Council Revenue Collection

AB-Council.29

Area: _____

District: _____

Unit: _____

Debtor Name: _____

Debtor Address: _____

Debtor Home Phone #: _____ Cell #: _____

Debtor email: _____

Total Amount Owing: _____

Details of amount owing (i.e cookies, camp fees, etc)
(please include any partial payments made/attach documents)

What action has been taken? (attach any emails/letters as appropriate)

I confirm all information is correct as stated.

Signature of Area Commissioner (or designate)

Date

**all requests for Revenue Collection are to be submitted by the Area Commissioner to the Administrative Manager ensuring copies of all backup documents are attached.

September 2016
Updated October 2017