

## Unit Validation Signatures

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This page validates that the charter package, as prepared and submitted electronically, is approved by both the Chartered Organization and the Unit Leader .

The executive officer of the Chartered Organization is indicated at the top of the page. The Unit Leader is the Cubmaster, Scoutmaster or Advisor of the unit.

This final approval instructs Patriots' Path to activate the charter and register the unit for 2014

UCRS - Renewal Report
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### CHARTER RENEWAL APPLICATION

Unit: ~~11234~~ 1234  
 District: Black River County: \_\_\_\_\_  
 Unit Status: R Term: 12 months Expire Date: 12/31/2013

Charter Org: \_\_\_\_\_ Executive Officer: \_\_\_\_\_ Boys' Life: 13  
 Charter Organization Name: Thomas Smith Term: 12 months  
 Street Street Begins: 03/2013  
 Anytown, NJ Anytown, NJ Ends: 02/2014

Executive Officer Certification: \_\_\_\_\_ Signature \_\_\_\_\_ Registration: \_\_\_\_\_ Fee: \_\_\_\_\_

Our Organization approves this application and all reregistering adults. I understand the responsibility for the approval of new adults can be given to our chartered organization representative. (Complete information is on instruction sheet no. 28-420)

Paid Youth	14	\$110.00
Multiple Youth	0	\$0
Paid Youth BL	12	\$12.00
Paid Adults	10	\$12.00
Multiple Adults	0	\$0
No Fee Adults	5	\$0
Paid Adult BL	1	\$12.00
Unit Liability Insurance Fee		\$20.00
<b>Total Fee Submitted</b>		<b>\$556.00</b>

Council Representative Certification: \_\_\_\_\_ Signature \_\_\_\_\_

Unit Leader Certification: \_\_\_\_\_ Signature \_\_\_\_\_ Total Fee Submitted \$556.00

913 Months Completed Tenure 100% Boys' Life: N

Adult Members						
Position	Name	Person ID	Address	BL	DOB	M/F Phone
Committee Member	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	N	<del>XXXXXXXXXX</del>	M H <del>XXXXXXXXXX</del>
Ethnic Background: Yes						
ScoutParents Unit Coordinator	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	N	<del>XXXXXXXXXX</del>	M H <del>XXXXXXXXXX</del>
Ethnic Background: Yes						
Assistant Scoutmaster	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	N	<del>XXXXXXXXXX</del>	M H <del>XXXXXXXXXX</del>
Ethnic Background: Yes						
Assistant Scoutmaster	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	N	<del>XXXXXXXXXX</del>	M H <del>XXXXXXXXXX</del>
Ethnic Background: Yes						
Committee Chairman	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	N	<del>XXXXXXXXXX</del>	M H <del>XXXXXXXXXX</del>
Ethnic Background: Yes						
Assistant Scoutmaster	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	Y	<del>XXXXXXXXXX</del>	M H <del>XXXXXXXXXX</del>
Ethnic Background: Yes						

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