

## Step 1. Verify and complete all Pack General Information.

Pack General Information										X	
Council Name/#:	Stonewall Jackson			#	763		Mail Recipient:	c/o Linda Edwards			
*District Name:	Monticello			Address 1:	1228 Deermeadow Lane						
Website:	www.bsa.org			Address 2:							
Remarks:				City:	Fairfax	ST:	VA	Zip:	22032	Country:	US
Special Needs:											
				Description			Original Charter Date		*Charter Expiration		
<input type="checkbox"/> LDS Unit							11/01/86		10/31/02		
*Meeting Place:	Camp Friendship			*Charter Organization:	Grace Episcopal Church						
*Address 1:	1377 Lake Ruritan Rd			*Address 1:	619 Meadowbrook Rd						
Address 2:				Address 2:							
*City:	Herndon	*ST:	VA	*City:	Fairfax	*ST:	VA	*Zip:	22995	Country:	US
*Zip:	22911	Country:	US	*Zip:	22995	Country:	US				
	A/Code	Number	Ext		A/Code	Number	Ext				
*Meeting Phone:	434	589-1195		*Charter Phone:	434	589-5119					
Vehicle:	Year	Make	Model	# Belts	Plate:	Insurance (in thousands)					
				0		Per Person	Accident	Property			
OK		Cancel		Pack Photo...		Help					

## Step 2. Complete all Scout/Adult Personal Information.

**Scout - Scott Benson** [X]

Personal #1 | Personal #2 | Parents | Alt Relative | Remarks/Other | Benson, Scott [v]

\*Last: Benson \*First: Scott Initial: [ ] Suffix: [ ]  
Photo... Nickname: Scott

\*Address: 8810 Scott Road Mailing Address: [ ]  
[ ] (if different) [ ]

\*City: Fairfax \*ST: VA City: [ ] ST: [ ]  
\*Zip: 22033 Country: US [v] Zip: [ ] Country: US [v]

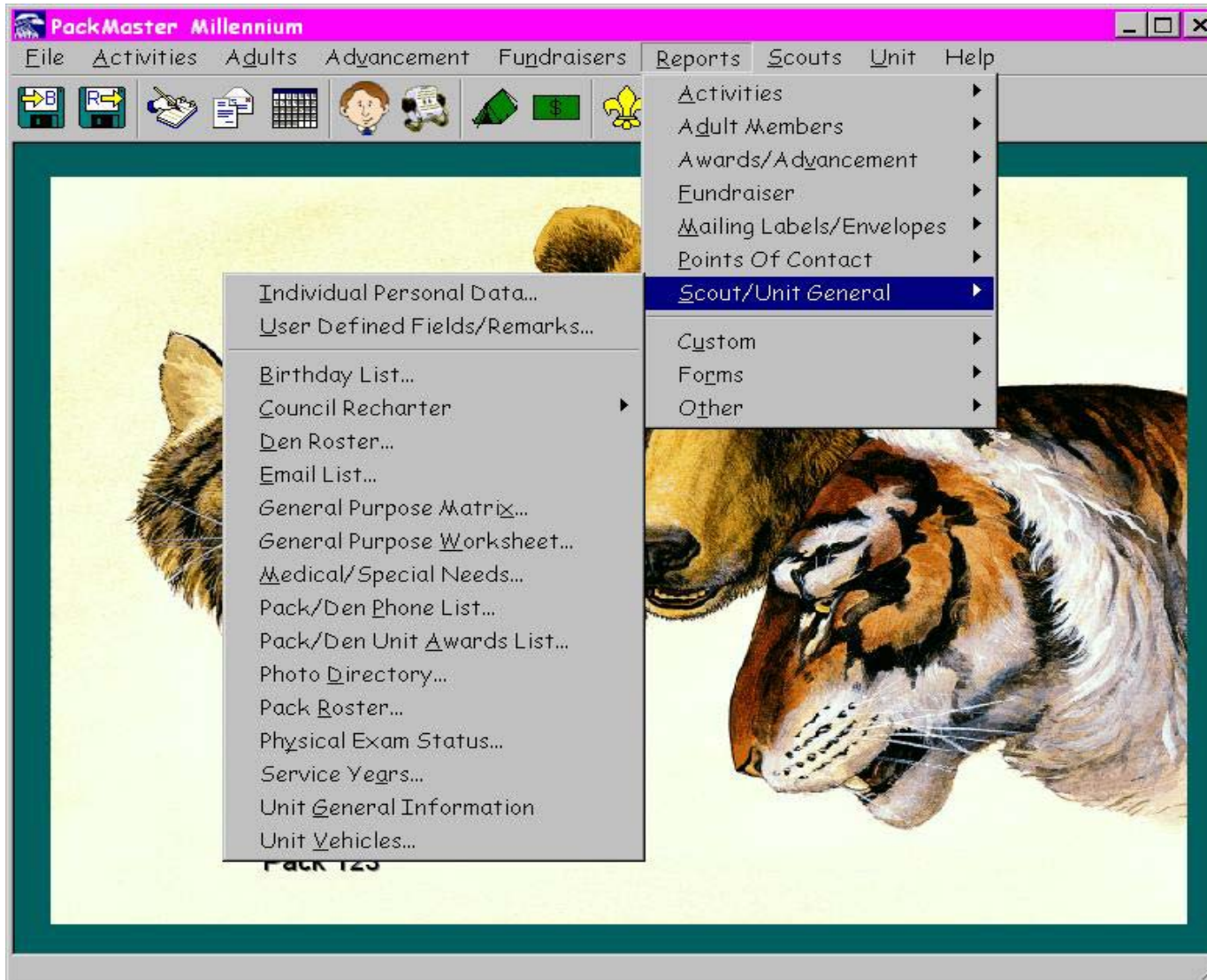
\*Family Home Phone: A/Code Number Ext \*DOB: 08/05/95 SSN: 451-88-7777  
Cellular [v] 434 442-8823 [ ]  
Pager [v] 434 [ ] [ ] \*Grade: 1  
School: Central Elementary

Email: bond007@spy.net

Joined Unit: 09/10/01 Became Tiger: 09/10/01 Became Webelos: [ ] Service Star  
Comp. Date: 09/10/01  
Eligible Webelos: 08/05/05 Became Cub: [ ] Promoted to Boy Scout: [ ]  Boys Life

OK Link Sibling Cancel Help Del/Archive Prev Next Advancement Den  
Leadership

### Step 3. Generate Council Re-charter Report



## Step 4. Verify Pack Information.

**Council Recharter** [X]

Unit Level: Pack

Unit Number:

Old Expire Date:

New Expire Date:

Unit Term (months):

Meeting Day:

Meeting Freq:

Meeting Time:

County:

Leader Trained

Quality Unit

100% Boys Life

Magazine Bulk Delivery

Print copy of transmittal file

Print council report using

Home address

Mailing address

Pricing

Full Registration:

Transfer Fee:

Boy's Life Fee:

Unit Fee:

Step 5. Select Leaders to Re-charter Indicate this by marking as paid.

**Recharter Selection**

Adults	Position Code	Status	Boys Life
Armstrong, Maureen	CR	Paid	
Armstrong, Maureen	CC	Paid	
Benson, Margie	MC	Paid	
Bumstead, Blondie	IH	Multiple	Yes
Bumstead, Blondie	MC	Paid	Yes
Cottingham, Mark	DL	Paid	
Fitzgerald, Karen	WL	Paid	
Scouter, John	CM	Paid	
Scouter, Mary	TL	Paid	
Strackson, Duane	WA	Paid	

Display  
 Scouts  
 Adults

Select Member Groups...

Paid

Transfer

Multiple

Non-Registering

Clear

Adults

Paid:	9
Transfer:	0
Multiple:	3 *
Non-Registering:	0
Boys Life:	1

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Registration:	\$63.00
Boys Life:	\$9.00

\* Includes Tiger Adults

<< Back      Help      OK

Step 6. Select Scouts to Re-charter Indicate this by marking paid.

Scouts	Age at Recharter	Status	Boys Life
Armstrong, Tommy	11	Paid	Yes
Benson, Scott	7	Paid	Yes
Cottingham, Gregory	9	Paid	Yes
Fitzgerald, Larry	9	Paid	Yes
Jacobson, Doug	11	Paid	Yes
Oliver, Bill	9	Paid	Yes

Display  
 Scouts  
 Adults

Select Member Groups...

Paid  
Transfer  
Multiple  
Non-Registering  
Clear

Scouts  
Paid: 6  
Transfer: 0  
Multiple: 0  
Non-Registering: 0  
Boys Life: 6

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Registration: \$42.00  
Boys Life: \$54.00

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Step 7. Make any corrections indicated by the Electronic Re-charter Report.

05/28/02

### Electronic Recharter Report

Date: 05/28/02      Time: 16:28:24  
PackMaster ME      Version: V02.00

**ScoutNET Fields Being Transmitted**

Unit mailing address  
Unit meeting location and phone number  
Unit special needs description, if any  
Chartered organization address and phone number

**Adult leader data for leaders being chartered:**

- name, home/mailing address, and home phone
- date of birth
- sex
- social security number, if any
- driver's license number and state
- special needs description, if any

**Scout data for scouts being chartered:**

- name, home/mailing address, and home phone
- date of birth
- sex
- grade
- social security number, if any
- special needs description, if any
- Data on each parent or other relative:
  - name, address, and home phone
  - relationship to scout and guardian designation (yes/no)
  - sex
  - social security number, if any
  - driver's license number and state
  - occupation code and employer

**Problems noted in this recharter application:**

NONE

Step 8. Print the Charter Renewal Report & Verify for Correctness.

Electronic Recharter Report (Page 2 of 3)

02/07/02

### Charter Renewal Report

**Date:** 02/07/02      **Stonewall Jackson**  
**Time:** 13:46:24      **Troop 123**

**Unit:** 123  
**District:** Monticello  
**Unit Status:** \_\_\_\_\_

**County:** \_\_\_\_\_  
**Term:** 12 months      **Expire Date:** 08/31/2003

**Chartered Organization:** St Marks Episcopal Church  
 2226 Ruritan Lake Rd  
 Palmyra VA 24591

**Executive Officer:** Neil Neuben  
 8810 Greenwood Rd  
 Palmyra VA 22992

**Boys Life:**  
**Term:** 12 months  
**Begin:** 11/2002  
**End:** 10/2003

**Executive Officer Certification** \_\_\_\_\_

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)

Registration	Qty	Fee
Paid Youth	6	\$42.00
Transfer Youth	0	\$0.00
Multiple Youth	1	XXXXXXXX
Youth Boys Life	7	\$63.00
Paid Adults	6	\$42.00
Transfer Adults	0	\$0.00
Multiple Adults	1	XXXXXXXX
Adult Boys Life	2	\$18.00
Charter Fee		\$20.00
<b>Total Fees Submitted</b>		<b>\$185.00</b>

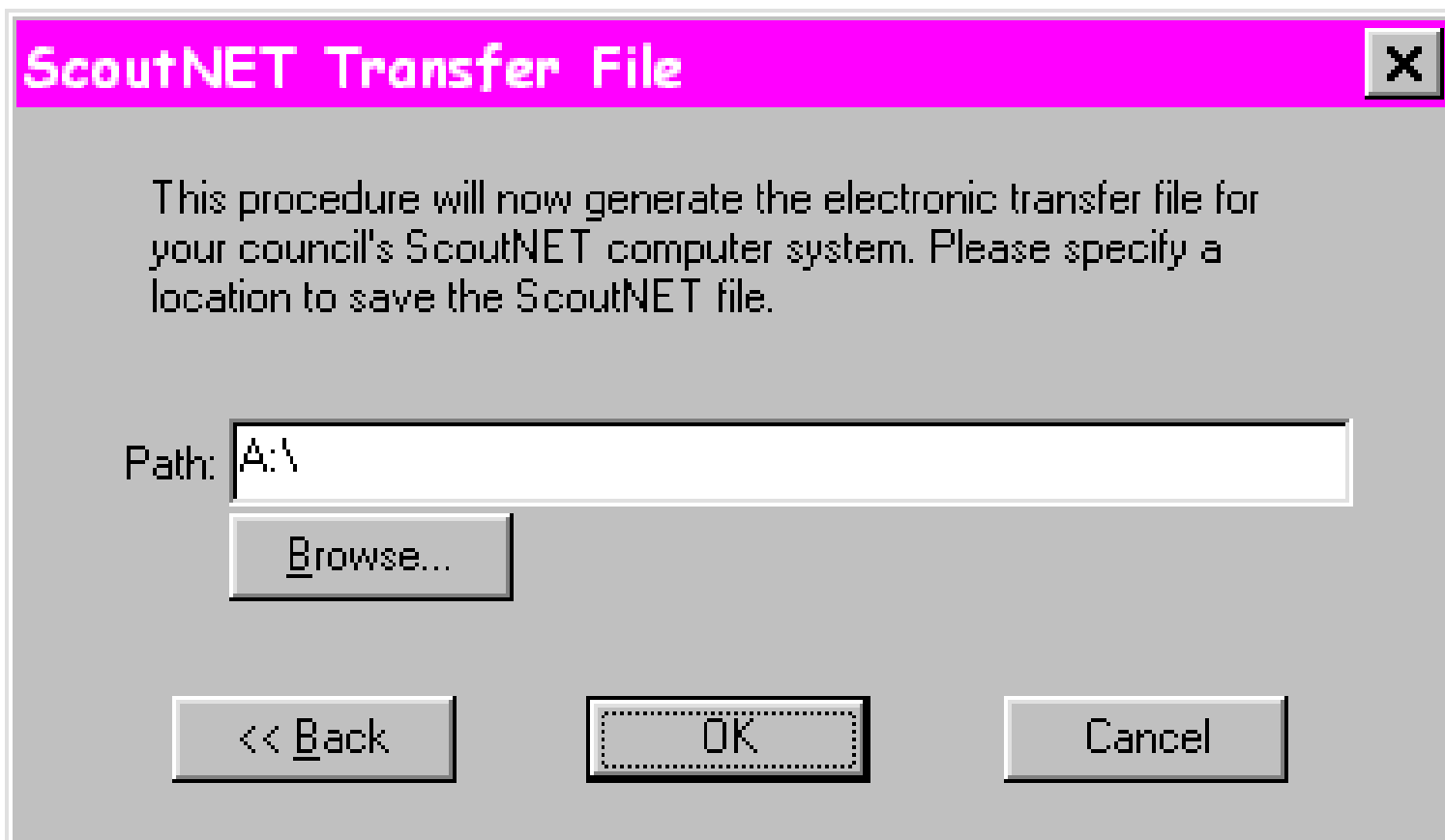
**Council Representative Certification** \_\_\_\_\_

212 Months Completed Tenure      Disability Code: \_\_\_\_\_      100% Boys Life: Yes      On Time Unit: \_\_\_\_\_

### Adult Members

Position / Trained	Name	Address	B/L	Birth Date	Sex	Phone
Membership Chm F	Lon Bennett	117 Lancaster Terrace Scottsville VA 22993	N	08/10/1960	M	(H) (804) 442-4391
Advancement Chm F	Samuel Edwards	4 Marie Circle Cunningham VA 22991	N	01/01/1968	M	(H) (804) 422-5024

Step 9. Create copy of the Electronic Re-charter Report on a Floppy or on to your hard drive then either bring the floppy to your Council Office or send the file via e-mail.



Step 10. Complete your registration by turning in all fees to the Council office along with signed copies of your Re-charter documents

Help is available by Dialing the Council office or:



**TSI**  **PackMaster® Millennium**

\*Version: 2.00

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Comprehensive unit management system for  
adult leaders of Cub Scouts

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Ten Easy Steps to Electronic  
Re-Charter for Cub Scout Packs  
Courtesy of  
TSI