



ROA Financial Report

Departments, Chapters, and Other Structural Entities

Name of Entity: _____

*Subordinate organizations should include parent Department (Example: Arizona - Sig R Young 009)

Employer Identification Number (EIN): _____

Financial Statements for Fiscal Year Ended (month/year): _____

(Note: ExCom Policy E-16, Section 7: (a) The fiscal year of the Association shall begin each year on the first day of April. (b) The fiscal year for all ROA subordinates, including departments and chapters, shall be in alignment with National.

Income & Expense Statement

Income _____

Expenses _____

Income Examples: rebates, interest/dividends, fundraising, contributions, sponsorships, etc)

Expense examples: supplies, printing/postage, travel, fundraising, etc)

Balance Sheet at End of Fiscal Year

Cash/Bank Account Balance _____

Investments _____

Liabilities (attach explanation) _____

Net Assets _____

1) Do you have any subordinate entities? Yes No

If yes, list name and Employer Identification Numbers (EINs).

1) Name: _____ EIN: _____

2) Name: _____ EIN: _____

*Use a separate sheet to list any additional subordinate entities.

2) Please list all accounts, including investments, and their authorized signatories. Use a separate sheet to list any additional accounts. Account numbers are optional.

1) Bank/Institution: _____ Acct #: _____

Primary Authorized Signer _____

Secondary Authorized Signer _____

2) Bank/Institution: _____ Acct #: _____

Primary Authorized Signer _____

Secondary Authorized Signer _____

3) Bank/Institution: _____ Acct #: _____

Primary Authorized Signer _____

Secondary Authorized Signer _____

Submitted by: _____ Date: _____

Return completed form to: Reserve Organization of America
Attention: Tracey Ware
One Constitution Avenue, NE
Washington, DC 20002

Phone: (202) 646-7733
Email: tware@roa.org