



SERVICE UNIT ANNUAL FINANCIAL REPORT

October 1, _____ to September 30, _____

Each service unit must submit a financial report for all accounts opened in the name of the service unit including one report for the service unit administration account and a separate report for the account you use for program. This form is designed for both accounts. Attach a copy of the most recent bank statement to this report. Service unit finance director and service unit director should each retain one copy for the service unit files. Both the service unit finance director and service unit director must sign this report. Send this report to the Council Girl Services Director no later than September 30 of each year.

- Service Unit Administrative Account
- Girl Program Account (Events, Day Camps, Programs)

Service Unit _____ Date _____

Phone: Day (____) _____ Evening (____) _____

Income

Sources of income	Income
Balance from previous year	_____
Fund-raising activities:	_____
Income from service unit sponsor/if applicable	_____
Name of sponsoring group _____	
Contact name _____	
Phone (____) _____	
Income (events and activities including day camp):	_____
Other cash donations:	_____
(Source) _____	
(Source) _____	
Total income:	\$ _____

Additional in-kind donations:

Source _____ Item _____ Value \$ _____
 Source _____ Item _____ Value \$ _____

* See council policies related to additional fund raising.

(Continued on other side)

Expenses

Expense description	Expense
Retain the itemized receipts for unit purchases and note for your long reference if purchased for a program or event, etc.	
Stationery/postcards	_____
Postage	_____
Copying	_____
Refreshment supplies	_____
Babysitting	_____
Building rental	_____
Equipment (please list):	_____

Service unit activities (include day camp):	_____

Miscellaneous:	_____

Total expenses:	\$ _____

A. Total income	
B. Subtract total expenses	
C. Balance	\$ _____

Checking/Savings Account Information

Name of bank/financial institution _____

Bank address including city and state _____

Checking account # _____ Balance \$ _____

Other checking account # _____ Balance \$ _____

Savings account # _____ Balance \$ _____

Names on service unit account: _____ Title: _____

(Please print) _____ Title: _____

_____ Title: _____

Signature of service unit finance director Date

Signature of service unit director Date