

State Annual Report Form

Calendar/Fiscal Year: 20_____

Due: **ANNUALLY by JANUARY 31**

E-mail to: info.churchwomenunitedinc@gmail.com

Mail to: 475 Riverside Drive Suite 1374 New York, NY 10115

STATE:	REGION: East Central
EMPLOYER IDENTIFICATION NUMBER #	

State Officers:

(Please *print* legibly and be sure to fill out BOTH sides of this form)

State President

Address: _____

City, State, Zip: _____

Phone: _____

Cell: _____

e-mail: _____

Treasurer:

Address: _____

City, State, Zip: _____

Phone: _____

Cell: _____

e-mail: _____

Communications Chair:

Address: _____

City, State, Zip: _____

Phone: _____

Cell: _____

e-mail: _____

Action/Global Chair:

Address: _____

City, State, Zip: _____

Phone: _____

Cell: _____

e-mail: _____

Celebrations Chair:

Address: _____

City, State, Zip: _____

Phone: _____

Cell: _____

e-mail: _____

Celebration/ State Assembly/Other Statistical & Financial Report

CELEBRATION	# PARTICIPANTS	OFFERING
<i>May Friendship Day</i>		\$
<i>Fellowship of Least Coin</i>		\$
<i>Human Rights Day</i>		\$
<i>World Community Day</i>		\$
<i>Special events</i> <i>(Fundraising to support National Office)</i>		\$
<i>State Assembly</i>		\$

Denomination Statistics

CELEBRATION/EVENTS /SPECIAL PROGRAM	# PARTICIPATING DENOMINATIONS	# NON-PARTICIPATING DENOMINATIONS OR GUEST
<i>May Friendship Day</i>		
<i>Human Rights Day</i>		
<i>World Community Day</i>		
<i>State Assembly</i>		

Please use a separate sheet if needed

Annual Financial Report: PLEASE DO NOT ENTER or REPORT ANY ACCOUNT #.

BEGINNING ACCOUNT BALANCES		INCOME RAISED	EXPENSES	COMMENTS
Total Checking/Savings				
Total Endowment account, Certificate deposits, etc.				
ENDING BALANCES				

Financial Support:

All States/Local units are obligated to support CHURCH WOMEN UNITED, INC Per Bylaws

PLEDGE	PLEDGE AMOUNT	PLEDGE AMOUNT RECEIVED	PAYMENT DATES(S)
State Pledge to National			

UNIT CLOSINGS

UNIT NAME	NATIONAL PROCESS <i>Was closing processed followed per CWU By Laws?</i>	DOCUMENTATION: Please confirm: CLOSING MINUTES/RECORD OF CLOSED BANK ACCOUNTS AND FINAL <i>Beneficiary</i> PAYMENTS LIST FILED AT THE NATIONAL OFFICE.	DATE CLOSED

ANNUAL HIGHLIGHTS (Please share at least 1-2 major projects and/or events sponsored by the State) Please forward your highlights to your Regional Coordinator.

DON'T FORGET!

1. Send a copy to your Regional Coordinator
2. Retain a copy for your records.

For additional information or help with this form call the National Office at (212)870-1030

STAY IN TOUCH

Check this box if you would like all of your unit's officers to receive CWU updates via email.

Note: only those officers who list an email address will be subscribed. Every member of CWU is welcome to subscribe—email info.churchwomenunitedinc@gmail.com and request to be added to our email list.