

## CCCA

Instructions for completion of the Section Financial Report Form

**CCCA's Fiscal year is from October 1<sup>st</sup>-September 30th**

### **Income Statement**

Income should include all funds earned by your section for October 1, 2020 to September 30, 2021. Provide an accurate break-down of income by type. Income earned but not received should be recorded as an account receivable.

Expenses should include all items that the section has either paid or is legally obligated to pay for the 12 months ended September 30, 2021. Goods and services received prior to September 30, 2021, but not paid, should be included in accounts payable.

### **Balance Sheet**

Cash should include any bank or investment accounts under the control of your section. Prepare a bank reconciliation and send a copy of the reconciliation along with your financial report to CCCA. If you have more than one bank account (or have investments), prepare a summary of the balances, which should agree to the cash line of the report.

Accounts receivable would include balances due your section, such as for unpaid dues or for sales. If applicable, prepare a listing as described in the cover letter and send a copy along with your financial report to CCCA.

**Other assets:** please provide a detailed description and amount of what these are.

Accounts payable includes amounts the section is legally obligated to pay at September 30 resulting from a purchase or some other agreement. An example: office supplies ordered and received in September, but not paid until October should be included in accounts payable. If applicable, prepare a listing as described in the cover letter and send a copy along with your financial report to CCCA.

**Other liabilities:** please provide a detailed description and amount of what these are.

**If you use a software program to keep track of the section's income and expenses, please do not just send a copy of the financial statement from this program unless the categories match the ones on the provided financial forms.**

## **SECTION FINANCIAL REPORT FORM**

Please complete and return to the national office to be received no later than October 15, 2021. To be filled out by Section President with Treasurer.

Section: \_\_\_\_\_ Region: \_\_\_\_\_

Section President: \_\_\_\_\_

Section treasurer: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

### **CURRENT SECTION ACCOUNT INFORMATION:**

Account type: \_\_\_\_\_ Account number: \_\_\_\_\_

Bank name: \_\_\_\_\_

Bank address: \_\_\_\_\_

Section officers authorized to sign checks: \_\_\_\_\_

CCCA National Staff person authorized to sign checks: \_\_\_\_\_

**If you have additional accounts, please fill out the section below. If you have more than 2 accounts, please contact [ebarnes@ccca.org](mailto:ebarnes@ccca.org) for additional instructions.**

Account type: \_\_\_\_\_ Account number: \_\_\_\_\_

Bank name: \_\_\_\_\_

Bank address: \_\_\_\_\_

Section officers authorized to sign checks: \_\_\_\_\_

CCCA National Staff person authorized on account: \_\_\_\_\_

### **GENERAL INCOME STATEMENT FOR THE FISCAL YEAR ENDING SEPTEMBER 30:**

#### **Income:**

	<u>Budget</u>	<u>Actual</u>
Sectional program fees	_____	_____
Resource sales	_____	_____
Exhibitor income	_____	_____
Other programs	_____	_____
Future Sectionals/programs	_____	_____
General donations	_____	_____
Designated funds	_____	_____

Miscellaneous \_\_\_\_\_

**TOTAL INCOME** \_\_\_\_\_

**Expenses:**

	<u>Budget</u>	<u>Actual</u>
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Direct Sectional expenses \_\_\_\_\_

Resource purchases \_\_\_\_\_

Direct other programs \_\_\_\_\_

Future Sectionals/programs \_\_\_\_\_

Section Presidents Conference \_\_\_\_\_

Administrative and office \_\_\_\_\_

General \_\_\_\_\_

Travel \_\_\_\_\_

General donations \_\_\_\_\_

Designated funds \_\_\_\_\_

Lobbying Expense \_\_\_\_\_

Attorney Fees paid \_\_\_\_\_

Miscellaneous \_\_\_\_\_

**TOTAL EXPENSES** \_\_\_\_\_

**TOTAL INCOME OVER EXPENSES** \_\_\_\_\_

**Section Donations Made to CCCA** \_\_\_\_\_

**National Office** \_\_\_\_\_

**GENERAL ASSETS STATEMENT FOR THE FISCAL YEAR ENDING September 30**

**Assets:**

Balance

Cash \_\_\_\_\_

Accounts receivable \_\_\_\_\_

Inventories \_\_\_\_\_

Other: \_\_\_\_\_

**TOTAL ASSETS** \_\_\_\_\_

**Liabilities:**

Balance

Accounts payable \_\_\_\_\_

Other: \_\_\_\_\_

**TOTAL LIABILITIES** \_\_\_\_\_**TOTAL ASSETS  
OVER LIABILITIES** \_\_\_\_\_

Signature of person preparing this form:

\_\_\_\_\_  
Name \_\_\_\_\_ Date: \_\_\_\_\_  
Section Position**RETURN TO:**

Christian Camp and Conference Association  
Emily Barnes  
P.O. Box 62189  
Colorado Springs, CO 80962-2189  
Phone: 719/260-9400, ext. 138  
Fax: 719/260-6398  
E-mail: [ebarnes@ccca.org](mailto:ebarnes@ccca.org)