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| **Ice Age Trail Alliance** |
| **Chapter Monthly Financial Summary** |
|  |
|  |  | Chapter: |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  | Month: |   |    |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  | Completed by: |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |   |  | Checking |  | Savings |  | CD / Other |
| Starting cash balance (beginning of month)\* |   | LINE A |   |  |   |  |   |
|  |  |  |  |  |  |  |  |  |  |
| Ending cash balance (end of month)\* |  | LINE B |   |  |   |  |   |
|  |  |  |  |  |
|   |  | *\*These must match your accompanying bank statement(s)1* |  |  |
|  |  |  |  |  |  |  |  |
| Cash taken in by category for the month |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  | - Transfer of Funds |  |  |  |  |  |  |  |
|  | - Merchandise Sales |  |  |   |  |   |  |   |
|  | - Alliance Annual Membership Allocation |  |  |   |  |   |  |   |
|  | - Donations (***please detail on the accompanying page***)***2*** |  |  |   |  |   |  |   |
|  | - Event & Program Revenue |   |  |   |  |   |
|  | - Interest Income |  |  |   |  |   |  |   |
|  | - Miscellaneous Income (***please detailon the accompanying page)2*** |   |  |   |  |   |
|  |  |  |  |  |  |  |  |  |  |
|  |  | Total Revenue |  | LINE C |   |  |   |  |   |
|  |  |  |  |  |  |  |  |  |  |
| Expenses by category for the month |  |  |  |  |  |  |  |
|  |  |  | Check number(s) associated with these expenses |  | Checking |  | Savings |  | CD / Other |
|  | - Transfer of Funds |  |  |  |  |  |  |  |  |
|  | - Postage |  |  |  |   |  |   |  |   |
|  | - Printing |  |  |  |   |  |   |  |   |
|  | - Office Supplies |  |  |  |   |  |   |  |   |
|  | - Travel Expense |  |  |  |   |  |   |  |   |
|  | - Chapter Event Expense |  |  |  |   |  |   |  |   |
|  | - Conferences & Training |  |  |  |   |  |   |  |   |
|  | - Trail Supplies/Expenses |  |  |  |   |  |   |  |   |
|  | - Equipment Purchase & Rental3 |  |  |  |  |  |  |  |  |
|  | - Bank Charges |  |  |  |  |  |  |  |  |
|  | - Dues & Subscriptions |  |  |  |  |  |  |  |  |
|  | - Misc. Expenses (***please detail on the accompanying page***)***2*** |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  | Total Expenses |  | LINE D |   |  |   |  |   |

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| VERIFICATION |
| *Please complete from information on previous page* |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | Checking |  | Savings |  | Other |
|  | LINE A |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  | Add LINE C |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  | Subtract LINE D |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  | Equals LINE B |  |  |  |  |  |  |

*Important Notes:*

* 1 Please attach copies of your monthly statements from your financial institution.
* 2 For donations and miscellaneous income/expenses, please provide details on the attached spreadsheet or in the space below.
	+ If you use the space below, please provide all the same types of info as listed in the header row of the spreadsheet.
	+ Providing complete info helps us keep our records up to date and eliminates the need for follow up requests for more info.
* 3 Please attach copies of receipts for purchases over $1,000.00.

**Thank you for your assistance!**

**If you have any questions, please contact Jo Ellarson, IATA Administrative Assistant
(joanne@iceagetrail.org, 800-227-0046 x 229).**

**DONATION INFO**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date | Amount | Company/Organization | First Name | Last Name | Address | City | State | Zip | Notes |
|  |  |  |  |  |  |  |  |  |  |
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**MISCELLANEOUS INCOME INFO**

|  |  |  |  |
| --- | --- | --- | --- |
| Date | Amount | Source | Notes |
|  |  |  |  |
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**MISCELLANEOUS EXPENSE INFO**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date | Amount | Check # | Spent on… | Notes |
|  |  |  |  |  |
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