

**CATHOLIC DAUGHTERS OF THE AMERICAS
FINANCIAL REVIEW**

FOR THE PERIOD APRIL 1, _____ – SEPTEMBER 30, _____
OR (PLEASE CHECK ONLY ONE)
FOR THE PERIOD OCTOBER 1, _____ - MARCH 31, _____

TOTAL MEMBERSHIP ON YOUR RECORDS AS OF SEPTEMBER 30 OR MARCH 31 WAS _____

COURT NAME _____ COURT # _____ CITY _____ STATE _____

1. Total amount paid out by check for Religious, Charitable, and Educational purposes. Include amounts paid to National Office and State Court for these purposes. Total \$ _____
2. Paid to National Court:

National Dues, Assessments and Insurance	\$ _____	
Supplies, Jewelry and Gift Items	_____	
Paraphernalia (robes, banner, flags)	_____	
_____	_____	
Other (specify)		
		Total \$ _____
3. Paid to State Court:

State Dues and Assessments	\$ _____	
Special State Court Projects	_____	
		Total \$ _____

FUND BALANCES

	LAST REPORT	CURRENT REPORT
CHECKING ACCOUNT	\$ _____	\$ _____
SAVINGS ACCOUNT	\$ _____	\$ _____
MASS FUND	\$ _____	\$ _____
MONEY MARKET ACCOUNTS	\$ _____	\$ _____
CD'S	\$ _____	\$ _____
TREASURY ACCOUNTS	\$ _____	\$ _____
OTHER FUNDS (SPECIFY)		
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
	TOTAL CURRENT FUNDS OF COURT \$ _____	

We, the undersigned Financial Review Committee of the Court hereby certify that we have reviewed the Court books, examined and checked the bank accounts and that the foregoing report is a true and correct statement of the funds of this Court.

	_____ Financial Review Committee
	_____ Financial Review Committee
	_____ Financial Review Committee

District Deputy/State Representative

Send:

Original copy to National Office:
CATHOLIC DAUGHTERS OF THE AMERICAS
10 West 71st Street
New York, NY 10023

Send a copy to:

Your State Regent
Your State Secretary
Your District Deputy/
or State Representative
RETAIN: A copy for Court files

REPORT SHOULD BE RETURNED TO APPROPRIATE DESIGNATIONS BY NOVEMBER 1 OR MAY 1 OF THE CURRENT YEAR.