

CHARITABLE ORGANIZATION - FINANCIAL INFORMATION FORM -

PLEASE TYPE OR PRINT IN INK. Organizations that have been in operation less than one (1) year are required to complete this form, in compliance with the "Charitable Organization Registration Statement" Form CO-1 Line 20, and file each form with the Attorney General's Office, Charitable Trust Bureau, 115 S. LaSalle St, Chicago, IL 60603

1. Name, address and telephone number of the organization: _____

2. The books and records are located at the following address and telephone number: _____

3. Are the gross receipts for the current calendar/fiscal year expected to exceed \$10,000.00? Yes No
4. Please provide the following information:

From inception _____ thru _____
Month/Day/Year Month/Day/Year

GROSS RECEIPTS TO DATE

ASSETS

Contributions, Gifts & Grants	\$		Cash	\$	
Program Service Revenue			Accounts Receivable		
Dues			Other Receivables		
Interest & Dividends			Inventory		
Rents			Investments		
Fund Raising Events			Land, Buildings, Equip.		
Other Revenue			Other Assets		
TOTAL	\$		TOTAL	\$	

(IN LIEU OF THE ABOVE FINANCIAL INFORMATION, A CURRENT TREASURERS REPORT MAY BE SUBSTITUTED, PROVIDED THAT IT PROVIDES SUBSTANTIALLY THE SAME INFORMATION)

CERTIFICATION

UNDER PENALTY OF PERJURY, THE UNDERSIGNED DECLARE AND CERTIFY THAT THE INFORMATION CONTAINED IN THIS STATEMENT AND ALL ATTACHED SHEETS IS TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE.

Note: At least two different persons, familiar with the financial affairs of the organization, are required to sign. These parties should be the President and the Chief Financial Officer, other authorized Officer or two Trustees.

Name and Title _____
Address _____

Signature and Date Signed _____

Name and Title _____
Address _____

Signature and Date Signed _____
