

ANC QUARTERLY REPORT OF FINANCIAL ACTIVITY

Quarterly Report Period Covered _____ ANC _____

Summary of Receipts and Disbursements: Checking Account

Balance Forward (from "Ending Balance" of Previous Quarterly Report) \$ _____

Receipts:

District Allotment(s)	\$ _____
Interest Income	\$ _____
Other Deposits	\$ _____
Transfer(s) from Savings Account	\$ _____

Total Receipts \$ _____

Total Funds Available \$ _____

Disbursements:

1. Net Salary and Wages	\$ _____
2. Workers Compensation	\$ _____
3. Insurance:	
a. Health	\$ _____
b. Casualty/Property	\$ _____
4. Total Federal Wage Taxes	\$ _____
5. State (DC, MD, VA) Wage Taxes Paid	\$ _____
6. Unemployment Insurance Contributions	\$ _____
7. Tax Penalties Paid	\$ _____
8. Local Transportation	\$ _____
9. Office Rent	\$ _____
10. Telecommunication Services:	
a. Landline Telephone	\$ _____
b. Cellular Telephone	\$ _____
c. Cable/Internet Services	\$ _____
11. Postage and Delivery	\$ _____
12. Utilities	\$ _____
13. Printing and Copying	\$ _____
14. Flyer Distribution	\$ _____
15. Purchase of Service	\$ _____
16. Office Supplies	\$ _____
17. Office Equipment:	
a. Rental	\$ _____
b. Purchase	\$ _____
18. Grants	\$ _____
19. Training	\$ _____
20. Petty Cash Reimbursement	\$ _____
21. Transfer(s) to Savings Account	\$ _____
22. Bank Charges	\$ _____
23. Website/webhosting	\$ _____
24. Other (Attach a detailed fully-supported explanation)	\$ _____

Total Disbursements \$ _____

Ending Balance: (Should Agree with Checkbook Balance at End of Quarter) \$ _____

Approval Date By Commission: _____

_____ Treasurer	_____ Chairperson	_____ Secretary
--------------------	----------------------	--------------------

Secretary Certification _____ **Date** _____

I hereby certify that the above noted quarterly financial report has been approved by a majority of Commissioners during a public meeting in which there existed a quorum.

Explanation of Quarterly Report Form

Balance Forward: Dollar amount from "ending balance" of previous quarterly report.

Receipts:

District Allotment - Allotment(s) deposited to your Checking Account during the quarter.

Interest Income - Interest earned on Checking Account only.

Other Deposits - Any funds received other than District Allotment.

Transfer from Savings Account - Money taken from Savings Account and deposited into the Checking Account.

Disbursements:

- 1 **Net Salary & Wages** - Amount paid to employee(s) after deductions.
- 2 **Workers Compensation** - Amount paid by the ANC for workers compensation insurance.
- 3 **Insurance:**
 - a. Health - Amount paid by the ANC for employee health insurance coverage.
 - b. Casualty/Property - Amount paid by the ANC to purchase casualty or property liability insurance.
- 4 **Total Federal Wage Taxes Paid** - Amount of checks actually sent during the quarter to IRS for income taxes, Social Security, and Medicare (F.I.C.A.) withheld from employee's salary including the ANC's F.I.C.A. contribution.
- 5 **State (DC, MD, VA) Wage Taxes Paid** - Amount of checks actually sent during the quarter to the District or applicable state for income taxes withheld from employee's salary.
- 6 **Unemployment Insurance Contributions** - Amount of checks actually sent during the quarter to the District's Department of Employment Services.
- 7 **Tax Penalties Paid** - Amount paid to IRS for the non-payment, late payment or underpayment of wage taxes.
- 8 **Local Transportation** - Payments for Metro fare, cab fare, parking, and automobile mileage incurred while conducting official ANC business.
- 9 **Office Rent** - Rent for ANC Office.
- 10 **Telecommunication Services** -
 - a. Landline - Payments for telephone service.
 - b. Cellular - Payments for cellular services.
 - c. Cable/Internet - Payments for cable and internet services.
- 11 **Postage and Delivery** - Actual mail or other delivery costs paid.
- 12 **Utilities** - Payments for electricity, gas, oil, water and sewer services.
- 13 **Printing and Copying** - Actual cost paid for printing and copying.
- 14 **Flyer Distribution** - Actual cost paid for distribution of ANC meeting notices.
- 15 **Purchase of Service** - Fixed amounts paid for services rendered to the ANC under contract or other written agreement.
- 16 **Office Supplies** - Payments for materials and supplies associated with running the ANC office.
- 17 **Office Equipment:**
 - a. Rental - payments for renting office equipment.
 - b. Purchase - payments for buying office equipment.
- 18 **Grants** - Amount granted to organizations to perform activities in the public interest.
- 19 **Training** - payments for Commissioner training when not available from government sources.
- 20 **Petty Cash Reimbursement** - Total amount disbursed during the quarter to replenish the Petty Cash Account.
- 21 **Transfer(s) to Savings Account** - Amount transferred to Savings Account.
- 22 **Bank Charges** - Service charges, overdraft fees, and stop payment fees.
- 23 **Website/Webhosting** - Payment for website or webhosting services.
- 24 **Other** - All other payments disbursed during the quarter (Provide detailed explanation and supporting documentation.)

Ending Balance: Amount at the end of each quarter after all disbursements are subtracted from receipts.

SAVINGS ACCOUNT

Balance Forward: \$ _____

Receipts:

Transfer(s) From Checking Account \$ _____

Other (Interest Earnings, etc.) \$ _____

Total Receipts \$ _____

Total Funds Available: \$ _____

Disbursements:

Transfer(s) to Checking \$ _____

Other \$ _____

Total Disbursements \$ _____

Ending Balance: \$ _____

CHECKING AND SAVINGS ACCOUNT DEPOSITS		
Please list each deposit made this quarter into the ANC's <u>checking</u> and <u>savings</u> account		
Deposits to Checking Account (Include transfers from savings account)		
Date	Amount	Source
Deposits to Savings Account (Include transfers from checking account)		
Date	Amount	Source

Quarterly Financial Report Transmittal

Quarter Ending: _____ **Advisory Neighborhood Commission** _____

(Check all applicable boxes and use "Remarks" section for any items not submitted and provide explanation)

- Summary of Receipts and Disbursements: Checking Account
(Approval and Certification signed and dated)
- Check Listing
(Checks listed in sequential order based on date check written)
- Savings Account Form, Bank Statements for Savings Account, and copies of deposit or withdrawal slips (for the 3 months of the quarter)
- Bank Statements for Checking Account (for the 3 months of the quarter)
- Checking Account bank notifications, stop payment requests, and deposit slips for allotments or other checking account deposits
- Copies of the front and back of canceled checks
- Copies of any voided checks
- Supporting Documentation
(Cross-referenced by check number and submitted in check number order)
- Meeting Minutes for meetings held during the quarter
- Copy of the Commission's Budget
(Include with quarterly report if Budget approved during the quarter being reported)

Remarks and Other Documentation

Submitted by: _____ **Date Submitted:** _____