

2017-2018 CHAPTER & DEPARTMENT FINANCE REPORT

REPORTING PERIOD: 1 MAY 2017 THROUGH 30 APRIL 2018

CHAPTERS & DEPARTMENTS MUST SUBMIT SEPARATE REPORTS. OPEN FORM ON WEBSITE, TYPE INFO, PRINT FORM, OBTAIN THREE SIGNATURES*, SUBMIT WITH 990 FILING RECEIPT AND PROPERTY LIST. THIS FORM WILL CALCULATE THE TOTALS FOR YOU, DO NOT USE DOLLAR SIGNS OR COMMAS WHEN TYPING IN MIDDLE SECTION.

DEPARTMENT OF	R CHAPTER NAME AND NUMBER			
LOCATION (CITY	y/state)			
FEDERAL TAX I	D Number (Required!)			
DEPARTMENT OF	R CHAPTER BANK(S) NAME AND ACC	OUNT#		
			(USE BACK OF	FORM IF NECESSARY)
DEPARTMEN	T OR CHAPTER ACCOUNTS	GENERAL	WELFARE	TOTAL
1. BALANCE AT	START OF REPORTING PERIOD:			
2. Income during reporting period:				
3. TOTAL OF LIN	TES 1 AND 2:			
4. Expenditures During reporting period:				
5. BALANCE AT E	ND OF REPORTING PERIOD			
6. RESERVES HE (CDS, ETC.)	LD BY CHAPTER:			
8. Are you inc9. Do you hav	E VALUE OF YOUR REAL ESTATE AND O'CORPORATED? TE YOUR OWN BYLAWS? ARD YOUR OWN SCHOLARSHIP? TO YOUR OWN SCHOLARSHIP?	YES □ NO YES □ NO	\$ □ No	
*FINANCE OFFICER (PRINT)		SIGNATURE		DATE
*CHAP TRUSTEE OR DEPT AUDIT CHAIRMAN (PRINT)		SIGNATURE		DATE
*COMMANDER (PRINT)		SIGNATURE		DATE
SUBMIT WITH T	WO ATTACHMENTS: (1) IRS FORM 99	00 FILING <u>RECEIPT</u> TE AND OTHER PROI	PERTVI IST	
CHAPTERS:	SUBMIT FORM TO MOPH HEADQUARTERS NO LATER THAN 15 MAY 2018 SEND ONE (1) COPY TO YOUR DEPT FINANCE OFFICER. KEEP ONE (1) COPY FOR YOUR RECORDS.			
DEPARTMENTS:	SUBMIT FORM TO MOPH HEADQUARTERS NO LATER THAN 6 JUNE 2018 KEEP ONE (1) COPY FOR YOUR RECORDS.			
MOPH Address:	MILITARY ORDER OF THE PURPLE HEART PHONE: 703-642-5360 FAX: 703-642-1841 5413-B BACKLICK RD., SPRINGFIELD, VA 22151 EMAIL: MEMBERSHIP@PURPLEHEART.ORG			

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