



**AIR FORCE ASSOCIATION  
QUARTERLY FINANCIAL FORM**

UNIT NAME	STATE				
REPORT COMPLETED	Year	Year	3 <sup>RD</sup>	FOR THE FOLLOWING QUARTER	Year
1 <sup>ST</sup> JANUARY-MARCH	Year	3 <sup>RD</sup>	JULY-SEPTEMBER	Year	
2 <sup>ND</sup> APRIL-JUNE	Year	4 <sup>TH</sup>	OCTOBER-DECEMBER	Year	

- |   |    |
|---|----|
| 1. CASH IN BANK AND ON HAND AT BEGINNING OF QUARTER ..... | \$ |
| 2. RECEIPTS FROM AFA NATIONAL .....                       | \$ |
| 3. OTHER RECEIPTS .....                                   | \$ |
| 4. TOTAL RECEIPTS (Lines 2 & 3) .....                     | \$ |
| 5. TOTAL (Lines 1 & 4) .....                              | \$ |

**DISBURSEMENTS:** (Itemize & detail all disbursements; attach additional sheets as required)

- |   |                 |
|---|-----------------|
| <b>PAID TO:</b>   | <b>PURPOSE:</b> |
| <u>Education Support Expenditures</u>                                 |                 |
| 6.  |                 |
| 7.  | \$              |
| 8.  | \$              |
| 9.  | \$              |
| <u>Other Expenditures</u>   |                 |
| 10.   |                 |
| 11.   | \$              |
| 12.   | \$              |
| 13.   | \$              |
| 14.   | \$              |
| 15.   | \$              |
| 16. OTHER - PER ATTACHED SHEETS (If required) .....                   | \$              |
| 17. TOTAL DISBURSEMENTS (Lines 6 thru 16) .....                       | \$              |
| 18. CASH IN BANK AND ON HAND AT END OF QUARTER (Line 5 minus line 17) | \$              |

TOTAL UNPAID LIABILITIES AT END OF QUARTER      \$

ENDORSED BY		SUBMITTED BY	
	<i>State President</i>		<i>Chapter Treasurer</i>
ENDORSED BY		APPROVED BY	
	<i>Region President</i>		<i>Chapter President</i>