

STATEMENT OF FINANCIAL PERFORMANCE

Name: _____
 Address: _____
 Telephone: _____
 Date: _____
 Signature: _____
 Printed Name: _____
 Title: _____
 Organization: _____
 Address: _____
 Telephone: _____
 Date: _____
 Signature: _____
 Printed Name: _____
 Title: _____
 Organization: _____

IN	SECTION	AMOUNT	DATE	REMARKS
1	ADC			
2	ADP			
3	APC	51		
4	APCA			
5	LP	100		
6	NNPP			
7	PDP	100		
8	PRP			
9	SDP			
TOTAL AMOUNT		261		

I, _____, certify that the information furnished is true and correct to the best of my knowledge and belief.
 Signature: _____
 Printed Name: _____
 Title: _____
 Date: _____