



**Reporting Form for Chambers of Commerce or Economic and Community Organizations  
Seeking and/or Receiving Funding from a Municipal Natural Gas System**

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*Name of Organization*

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*Street Address*

*City*

*County*

*State*

*Zip*

**Request for Funding**

**Amount Requesting**

**\$ \_\_\_\_\_**

**Please Explain the Proposed Use of the Requested Funding from the Municipal Natural Gas System.**

**Please Explain How the Use of Funding will Benefit Municipal Natural Gas System and Its Customers.**

**Please attach a copy of your organization's most recent annual audit report or an internally prepared year-end income statement certified by the organization's chief financial officer or equivalent.**

**Annual Reporting**  
**Annual Financial Report of Funding Received**  
**from Municipal Natural Gas System**

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*Name of Organization*

**For the Fiscal Year Ended** \_\_\_\_\_

Report Required by Title 7, Chapter 34  
Tennessee Code Annotated

**Receipts**

Funds received from Municipal Natural  
Gas System

**Total Receipts** \$ \_\_\_\_\_ (A)

**Disbursements from (A)**

Grants and Other Assistance to Other  
Organizations and Individuals

\$ \_\_\_\_\_

Salaries and Wages

\_\_\_\_\_

Employee Benefits

\_\_\_\_\_

Payroll Taxes

\_\_\_\_\_

Fees for Services (non-employee)

\_\_\_\_\_

Advertising and Promotion

\_\_\_\_\_

Office Expenses

\_\_\_\_\_

Leases/Rentals

\_\_\_\_\_

Maintenance and Repairs

\_\_\_\_\_

Supplies

\_\_\_\_\_

Travel

\_\_\_\_\_

Utilities

\_\_\_\_\_

Insurance

\_\_\_\_\_

Conferences, Conventions and Meetings

\_\_\_\_\_

Interest

\_\_\_\_\_

Purchase of Capital Assets – Vehicles  
and Equipment

\_\_\_\_\_

Purchase of Capital Assets – Property  
and Buildings

\_\_\_\_\_

Loan Payments

\_\_\_\_\_

Other

\_\_\_\_\_

**Total Disbursements** \$ \_\_\_\_\_ (B)

**Cash Receipts Less Disbursements for**  
**the fiscal Year (A-B=C)**

\$ \_\_\_\_\_ (C)

**Cash Balance - at the beginning of the fiscal year** (prior year(s) funding not spent) \$ \_\_\_\_\_ (D)

**Cash Balance - at the end of the fiscal year (C+D=E)** \$ \_\_\_\_\_ (E)

**Details of Cash Balance - at the end of the fiscal year**

Cash on Hand \$ \_\_\_\_\_

Cash in Bank – Checking \_\_\_\_\_

Cash in Bank – Savings Accounts \_\_\_\_\_

Cash in Bank – Certificates of Deposits \_\_\_\_\_

Other Cash \_\_\_\_\_

**Total Cash - at the end of the fiscal year** \$ \_\_\_\_\_ (E)

**Please Explain How the Funding Received from Municipal Natural Gas System was Actually Used.**

**Please Explain How the Actual Use of Funding Received from the Municipal Natural Gas System Benefited the Municipal Natural Gas Utility System and Its Customers.**

I certify that this report accurately presents the cash receipts, disbursements, balances, and use(s) of funding of the \_\_\_\_\_ in relation to the funds received from the \_\_\_\_\_  
*Name of Organization* *Name of Municipality*  
 natural gas system for the fiscal year noted above.

Person Preparing Report \_\_\_\_\_  
*Printed Name* *Signature*

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_ Date \_\_\_\_\_