APPLICATION FORM FOR AVAILING FINANCIAL ASSISTANCE

From the Cooperative Department Government of Manipur

No.				
	Fina	ancial year		
1.	a)	Name of society :-		
	b)	Address of society with the name of district	:-	
	c)	Type of society	:-	
	d)	No. & year of registration of the society	:-	
	e)	Area of the operation of the society	:-	
	f)	Board of Directors / Management	:- elected / nominated	
	g)	Date of last General Body Meeting held	:-	
2.	Membership and paid up share capital as :- on			
	a)	Cooperatives		
	b)	State Government		
	c)	Individuals		
	d)	Others (please specify)		
	e)	SC/ST members if any:		
3.	Rese	Reserve / other fund (please specify)		
4.	Borrowing as on from			
	a)	Other financial institution:		
	b)	State Government:		
5.	Balance if any with bank as on			
6.		Accumulated net profit or loss as on		
7.	Deta	ails of financial assistance so far receive	ed : State Govt. – N.C.D.C. others	
	a)	M/S and grant :		
	b)	Share capital:		
	c)	Loan:		

- 8. Business activities:
 - a) Type of business undertaking
 - b) Amount involved in the business:
 - c) Sales turnover of the business during the last 3 year
- 9. If the assistance is for managing subsidy
 - a) Is the society having a paid manager
 - b) If yes, salary paid to manager
 - c) Amount of salary that society can pay from its resources:
 - d) Assistance now required:
- 10. Present working condition of the society [Enclose a brief note]
- 11. Amount for which the application is applied for :
- 12. Working report of the society is to be given by the Secretary / Managing Director of the society. It should be countersigned by the concerned D.C.O. [To be enclosed]
- 13. Whether utilization certificate for the last year financial assistance as enclosed or not, If yes, it should be countersigned by D.C.O. concerned.

YES / NO

- 14. Please enclosed the proceedings of the Board of Directors for availing the financial assistance from the state.
- 15. Please enclosed the audited balance sheet of the previous Year.
- 16. Please enclosed the photostat copy of the receipt voucher for payment of latest Annual subscription fee to the Manipur State Cooperative Union.

Recommendation by the concerned D.C.O. with Seal.

Signature of the Secretary

Managing Director of the Society

with seal