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| A close up of a logo  Description automatically generated with low confidenceTrent Bridge House, Beastmarket Hill, Newark, Notts, NG24 1BN. Tel: 01636 673550. E: admin@nottswi.org.uk | A picture containing emblem, symbol, crest, logo  Description automatically generated |

**WI ANNUAL REPORT FORM**

**IMPORTANT: Return this form immediately after your Annual Meeting as well as updating the MCS**

WI: ………………………………………………………………………… Charity No: …………………………………………………………….

Financial Year End: ……………………………………… Annual Meeting date: ……………………..………………..……

Monthly meetings: Day: …………..………. Week in month: …………………………. Time: ………………………………….

Venue Address: …………………………………………………………………………………………………………………………………………

……………………………………………………………………………………………………… Postcode: ………..…….…………………………

**OFFICERS for the coming year:**  Please print clearly in **BLOCK** capitals. New Officers will receive confirmation of their Notts WI Office 365 email address and password sent to their email address listed on MCS.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Full Name** | **Address & Tel Number** | **Email address** |
| **PRESIDENT**Has this changed since last year?[ ]  Yes [ ]  No |  |  |  |
| **SECRETARY**Has this changed since last year?[ ]  Yes [ ]  No |  |  |  |
| **TREASURER**Has this changed since last year?[ ]  Yes [ ]  No  |  |  |  |
| **MCS REP**Please update MCS with new officers’ details asap |  | **N/A** |  |

|  |  |  |
| --- | --- | --- |
|  **Committee for the coming year**  |  | **Membership** |
|  |  |  | Number of full members at the end of Financial Year:Number of dual members at the end of Financial Year: |
| Last visit by a WI Adviser to your Annual Meeting:Adviser’s name……………………………………………………………………………………. Date: …………………………………………. |

Please advise assistsec@nottswi.org.uk of any good speakers you have had, together with their contact details so that we can make contact with a view to them advertising in the Speakers’ Directory. We would also like to know of any speakers which you have found disappointing so that alterations could be made to the Speakers’ Directory.

[ ]  We have discussed GDPR and are compliant and up to date.

[ ]  The Equality and Diversity and Inclusion Statement has been discussed with WI members at the Annual Meeting and noted in the record of the Annual Meeting.

[ ]  The Committee has approved this report.

Signed……………………………………………………………………. Position …………………………………………. WI Date………………………

Please retain a copy of this form for your records.

Checklist of items returned to County House:

[ ]  Annual Report Form (please update the MCS as well as returning this form);

[ ]  Annual Committee Report;

[ ]  Completed Financial Statement (which must be signed by outgoing President, Treasurer and Financial Examiner); If your WI owns its meeting place, a separate balance sheet for the Hall accounts should be included to comply with Charity Commission Rules.

[ ]  IFE Request to be completed and submitted by the Treasurer.

[ ]  Declaration Checklist;

[ ]  Next year’s programme (x2).