



CHARITY COMMISSION
FOR ENGLAND AND WALES

Charity Name: Long Rock Memorial Institute

No (if any)
1093057

Receipts and payments accounts

CC16a

For the period from	Period start date 01-Oct-21	To	Period end date 30-Sep-22
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Section A Receipts and payments

	Unrestricted funds to the nearest £	Restricted funds to the nearest £	Endowment funds to the nearest £	Total funds to the nearest £	Last year to the nearest £
A1 Receipts					
hall hire	£0.00	-	-	£0.00	£0.00
grants	£0.00	-	-	£0.00	£0.00
Sub total (Gross income for AR)	£0.00	-	-	£0.00	£0.00
A2 Asset and investment sales, (see table).					
	-	-	-	-	-
Sub total	-	-	-	-	-
Total receipts	£0.00	-	-	£0.00	£0.00
A3 Payments					
	£0.00	-	-	£0.00	£0.00
Sub total	£0.00	-	-	£0.00	£0.00
A4 Asset and investment purchases, (see table)					
	-	-	-	-	-
Sub total	-	-	-	-	-
Total payments	£0.00	-	-	£0.00	£0.00
Net of receipts/(payments)	£0.00	-	-	£0.00	£0.00
A5 Transfers between funds	-	-	-	-	-
A6 Cash funds last year end	£17,663.19	-	-	17,663	17,663
Cash funds this year end	17,663	-	-	17,663	17,663

Section B Statement of assets and liabilities at the end of the period

Categories	Details	Unrestricted funds to nearest £	Restricted funds to nearest £	Endowment funds to nearest £
B1 Cash funds	Long Rock Memorial Institute account, Nationwide Building Society	510	-	-
	Long Rock Community Trust account, Nationwide Building Society	17,153	-	-
		-	-	-
	Total cash funds	17,663	-	-
	(agree balances with receipts and payments account(s))	OK	OK	OK
		Unrestricted funds to nearest £	Restricted funds to nearest £	Endowment funds to nearest £
B2 Other monetary assets	Details	-	-	-
		-	-	-
		-	-	-
B3 Investment assets	Details	Fund to which asset belongs	Cost (optional)	Current value (optional)
		-	-	-
		-	-	-
B4 Assets retained for the charity's own use	Details	Fund to which asset belongs	Cost (optional)	Current value (optional)
	Property - Long Rock Memorial Institute (no current valuation)	Unrestricted funds	-	-
B5 Liabilities	Details	Fund to which liability relates	Amount due (optional)	When due (optional)
			-	
			-	
Signed by one or two trustees on behalf of all the trustees	Signature	Print Name	Date of approval	