

ECONOMIC SURVEY OF

(Name of proposed CSF Cooperative)

BACKGROUND;

I. GENERAL INFORMATION

A. Office Address of CSF Cooperative: _____
(No., Street, Bgy., Town/City, Province)

B. Area of Operation: _____City _____Provincial

C. Common Bond of Membership: _____Associational

D. Composition of Members:
_____Cooperatives _____LGU/s _____GAs
_____NGOs _____GFIs

E. No. of Founding/Organizing Members:

_____Cooperatives
_____NGOs
_____LGU/s
_____GFIs
_____GAs

_____ **Total**

F. Projected Increase of Membership for:

First Year : _____
Second Year : _____
Third Year : _____

G. Authorized Capital P _____
Subscribed Capital P _____
Paid-up Capital P _____

Par value P _____

H. Credit Surety Fund/ Restricted Capital for Surety P _____

II. STRATEGIC OPERATIONAL STUDIES

A. Economic Aspect

1. What strategies shall the proposed cooperative implement to ensure the support of the members?

2. What risk management policies must the proposed CSF Coop follow?

B. Financial Aspect

1. Capitalization

a. In pursuing its economic activities, how shall the proposed Cooperative generate its capital?

- _____ Share Capital Subscription
- _____ Deferred payment of patronage refund/interest on share capital (Revolving Capital)
- _____ Solicitation/acceptance of donations, subsidies, grants, etc.

b. How much is the proposed Cooperative's initial operating capital? _____.

c. Strategies for internal capital build-up. _____.

2. Revenue

Projected revenue based on the initial operating capital.

- First Year : _____.
- Second Year : _____.
- Third Year : _____.

3. Expenditure

How much is the estimated expenses, for:

- First Year : _____.
- Second Year : _____.
- Third Year : _____.

4. Investments

Does the Cooperative intend to invest in the following?

- _____ Government Securities
- _____ Time Deposits

5. Restricted Capital for Surety/ Credit Surety Fund

Projected amount of Fund based on initial operations.

- First Year : _____.
- Second Year : _____.
- Third Year : _____.

C. Technical Aspect

1. What equipment/machineries/facilities are deemed necessary for the effective and efficient operation of the Cooperative? (please check)

- | | |
|------------------------------|-------------------|
| _____ Computer | _____ Vault/ Safe |
| _____ Filing Cabinet | _____ Calculator |
| _____ Chairs | _____ Typewriter |
| _____ Tables | |
| _____ Others (specify) _____ | |

2. How would the Cooperative procure its equipment/machineries/facilities?

- _____ Cash purchase Other mode/s (specify) _____
- _____ Loans _____
- _____ Donations _____

3. What skills/experiences/trainings are deemed necessary for the members and officers?

D. Organizational Structure/ (attached organizational chart)

1. What qualifications/skills should the Board of Directors possess to enable them to formulate sound policies, strategies and guidelines which would ensure the success of the Cooperative?

2. For its initial operations, who among the following officers/employees should be hired by the Cooperative.

POSITION	NAME	STATUS OF APPOINTMENT	MINIMUM EDUCATION EXPERIENCE/TRAINING	MONTHLY COMPENSATION
Manager				
Accountant/Book keeper				
Cashier				
Others				

(Permanent, Contractual, Full-time, Part-time, Volunteer, etc.)

3. What are the proposed Cooperative's education programs for:

- a) Members _____
- b) Officers _____
- c) Staff _____

4. Who are the Chairmen and members of the following committees?

- a) Audit _____
-
-

- b) Credit _____
-
-

- c) Election _____
-
-

- d) Education & Training _____
-
-

- e) Mediation/Conciliation _____
-
-

- f) Ethics _____
-
-

- g) Others (Specify) _____
-
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We, the founding Board of Directors, hereby certify that the foregoing Economic Survey was prepared in accordance with the facts, information and other data which we believed are vital to the success of the initial operations of the proposed CSF Cooperative.

Chairman

BOD Member

BOD Member

BOD Member

BOD Member

Subscribed and sworn to before me this _____ day of _____, 202__ in _____, Philippines above affiants exhibiting to me their valid proof of identity:

Names	Proof of Valid Identity	Office & Place of Issue

NOTARY PUBLIC

NOTE: The CDA reserves the right to review/verify the authenticity/viability of the information provided in this survey and may require the proponent to modify, revise or amend the whole or any part thereof if necessary, or, if found to be economically unfeasible, deny the registration of the Cooperative.