

Illinois DeMolay - Chapter Annual Financial Report & Audit

TAX YEAR: _____

Chapter Name: _____
 Chapter Number: _____
 Tax ID Number: _____
 Form Completed By: _____

A **Checking Account Balance (January 1):** \$ -

		Income		Expense		
B	Advisor Registration Fees		-		=	\$ -
C	Annual Insurance Premium		-		=	\$ -
D	Awards/Recognitions		-		=	\$ -
E	Chapter Events / Snacks		-		=	\$ -
F	Charity (State & Chapter)		-		=	\$ -
G	Contributions		-		=	\$ -
H	Fund Raising		-		=	\$ -
I	Interest/Dividends/Bank Fees		-		=	\$ -
J	Membership Fees (Youth)		-		=	\$ -
K	Membership Recruiting		-		=	\$ -
L	Postage/Shipping		-		=	\$ -
M	Regalia Purchases		-		=	\$ -
N	Rent (Lodge/Meeting Location)		-		=	\$ -
O	State Events		-		=	\$ -
P	Supplies / Copying		-		=	\$ -
Q	Travel Expense		-		=	\$ -
R	Other:		-		=	\$ -
S	Other:		-		=	\$ -
T	Total Income & Expenses:	\$ -		\$ -		

U **Uncleared Transactions:** Checks - Deposits = \$ -

V **Checking Account Balance (December 31):** \$ -

	Other Banking Accounts/CDs:	Bank/Financial Institution	Balance (Dec 31)
W			=
X			=
Y			=

Z **TOTAL CHAPTER TREASURY (December 31):** \$ -

*A copy of your year beginning and year ending bank statements for ALL accounts held by the chapter, along with this "Annual Financial Report & Audit" must be submitted to the Illinois DeMolay Executive Officer no later than **MARCH 1** of the following year.*

Audited by (Advisor Signature)

Audited by (DeMolay Signature)

Date of Audit: _____