

Service Chapter Audit Report

Email to: wotmmail@mooseintl.org OR fax to: (630) 966-2211

Chapter Name _____
Federal ID #: _____

Chapter No. _____
Month/Year _____

Financial ASSETS

Bank Statement Reconciliation

refer to last month's bank statement(s)

Checking	Amount	Total
Balance beginning of month		_____
Add Deposits/Interest	_____	
Subtract Expenditures	_____	
Balance end of month		_____

<i>Outstanding NSF checks</i> _____ <i>Bank Charges</i> _____ <i>Outstanding checks</i> _____ <i>Deposit in Transit</i> _____
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Savings

Balance beginning of month		_____
Add Deposits/Interest	_____	
Subtract Withdrawals	_____	
Balance end of month		_____

CD

Balance beginning of month		_____
Add Deposits/Interest	_____	
Subtract Withdrawals	_____	
Balance end of month		_____

Other

Balance beginning of month		_____
Add Deposits/Interest	_____	
Subtract Expenditures	_____	
Balance end of month		_____

Paraphernalia (acct 1800) _____

Amount of Depreciation taken in April _____

Liabilities outstanding bills to be paid

Moose International _____
 Endowment Fund _____
 Recorder Comp _____
 Other _____

Donations made during the month

Moose Charities _____
 Lodge _____
 Community Service _____

Membership

Updates Total

Membership last month's ending number _____

Enrollments	_____
Reenrollments	_____
Reinstatements	_____
Transfer In	_____
Dues Paid (expired)	_____
Total Additions	_____
Expired	_____
Deceased	_____
Transfer Out	_____
Resigned	_____

Total Deductions _____

Total Active Membership _____

Membership totals for:

MultiMemberships _____
Life Memberships _____
Moosehaven Memberships _____
50 Year Memberships _____

Audit Committee & Officer Signatures:

Audit Chairman

Audit Committee

Audit Committee

President

Secretary/Treasurer

Date Prepared
(revised 09/09)