

# Chapter Audit Report

**Chapter Name** \_\_\_\_\_ **Chapter No.** \_\_\_\_\_  
**Federal ID #:** \_\_\_\_\_ **Audit Month - Quarter/Year** \_\_\_\_\_

## Financial Assets

Bank Statement Reconciliation. See last month's bank statement(s).

<b>Checking</b>	<b>\$ Amount</b>	<b>\$ Total</b>
<b>Balance Beginning of Quarter</b>	_____	_____
Add Deposits / Interest	_____	
Subtract Expenditures	_____	
<b>Stmt Balance End of Quarter</b>	_____	_____
Add Deposits in Transit	_____	
Subtract Outstanding Checks	_____	
<b>CheckBook/QBs Balance</b>	A	_____
Outstanding NSF Checks	_____	
Bank Charges	_____	

## Savings

<b>Balance Beginning of Quarter</b>	_____	_____
Add Deposits / Interest	_____	
Subtract Withdrawals	_____	
<b>Balance End of Quarter</b>	B	_____

## CD

<b>Balance Beginning of Quarter</b>	_____	_____
Add Deposits / Interest	_____	
Subtract Withdrawals	_____	
<b>Balance End of Quarter</b>	C	_____

## Other / Bingo

<b>Balance Beginning of Quarter</b>	_____	_____
Add Deposits / Interest	_____	
Subtract Expenditures	_____	
<b>Balance End of Quarter</b>	D	_____

**Total Assets** A+B+C+D \_\_\_\_\_

## Liabilities (outstanding bills to be paid)

Moose Int'l (see Statement of Accounts) \_\_\_\_\_  
 Moose Charities (Endowment Fund) \_\_\_\_\_  
 Recorder (Compensation) \_\_\_\_\_  
 Payroll Tax \_\_\_\_\_  
 Other (e.g., recurring bills, etc) \_\_\_\_\_

## Donations (made during the quarter)

Endowment \_\_\_\_\_  
 Form 114 \_\_\_\_\_  
 Scholarship & Maintenance Fund \_\_\_\_\_  
 Mooseheart Activity Center \_\_\_\_\_  
 Moose Charities \_\_\_\_\_  
 Lodge \_\_\_\_\_  
 Community Service \_\_\_\_\_

## Membership Updates Total

Membership Totals from LCL Web  
 Starting membership May 1st \_\_\_\_\_  
     Enrolled this quarter \_\_\_\_\_  
         Active \_\_\_\_\_  
         Expired \_\_\_\_\_  
         Dropped \_\_\_\_\_

## Communications Yes / No / #

chapter#####@mooseunits.org < 100 Mb? \_\_\_\_\_  
 Chapter activities / meetings posted? \_\_\_\_\_  
 # of Board of Officers' meetings held (min of 3) \_\_\_\_\_  
 # of Chapter meetings held (min of 3) \_\_\_\_\_  
 # monthly reports to be submitted \_\_\_\_\_

## Reports Date / NA

Date Form 166 submitted \_\_\_\_\_  
 Date Form 114 submitted \_\_\_\_\_  
 Date Monthly Forms read on Chapter Floor \_\_\_\_\_  
 IRS 990/990EZ/990N filed (On or before Sept. 15) \_\_\_\_\_  
 IRS 940/941/944 filed (All audits) \_\_\_\_\_

## Audit Committee & Officer Signatures:

\_\_\_\_\_  
 (Audit Chairman)  
 \_\_\_\_\_  
 (Audit Committee)  
 \_\_\_\_\_  
 (Audit Committee)  
 \_\_\_\_\_  
 (Senior Regent)  
 \_\_\_\_\_  
 (Treasurer)

**Three (3) or more signatures required**

Email this report to: \_\_\_\_\_ Date Prepared \_\_\_\_\_  
**wotmmail@mooseintl.org**  
 or Fax to: (630) 966-2211 \_\_\_\_\_ Date Submitted to WOTM \_\_\_\_\_  
 on or before the **15th day of**  
**August, November, February and May**