

D17 LOCAL LODGE FINANCIAL STATEMENT



Lodge Name: _____ Lodge Number: _____ For Period Ending: **2019**

INCOME STATEMENT

- 1. Receipts**
- a. Dues and initiation fees..... \$ _____
 - b. Fundraising..... \$ _____
 - c. Interest and dividends..... \$ _____
 - d. Other..... \$ _____
- 2. Total Receipts** \$ _____
- 3. Disbursements**
- a. Community service..... \$ _____
 - b. Fraternal support..... \$ _____
 - c. Capital Investment..... \$ _____
 - d. Other..... \$ _____
- 4. Total Disbursements**..... \$ _____
- 5. Net Gain (Loss) line 2 minus line 4**..... \$ _____

BALANCE SHEET

Assets

- 6. Cash on hand and in bank** \$ _____
 - 7. Investments** \$ _____
 - 8. Furniture and equipment**..... \$ _____
 - 9. Other** \$ _____
- 10. Total Assets**..... \$ _____
- ### LIABILITIES
- 11. Loans, if any** \$ _____
 - 12. Other** \$ _____
- 13. Total Liabilities**..... \$ _____
- 14. Net Worth line 10 minus line 13**..... \$ _____
- 15. Total line 13 plus line 14**..... \$ _____
- 16. Net Worth as of Report Date item 14 above** ... \$ _____
- 17. Net Worth Prior Year-end**..... \$ _____
- 18. Net Increase (Decrease) line 16 minus line 17**..... \$ _____

If there is a major deviation in any of the numbers compared with the previous year, please explain.

President's Name and Member Number (please print)

Treasurer's or Financial Secretary's Name and Member Number (please print)

President's Signature Date

Treasurer's or Financial Secretary's Signature Date

REPORT OF AUDITING COMMITTEE

I, as the Audit Committee Chair, along with the Audit Committee, have audited the books of the Treasurer of our lodge for the period shown above and find them correct. The information recorded above is also correct and agrees with the books except as stated in the remarks on the attached sheet.

Audit Committee Chair's Name and Member Number (please print)

Audit Committee Chair's Signature Date

All signatures are required for acceptance by Headquarters.

For Office Use Only: Date Received _____

Lodges: Upon completion of this form, print a copy, obtain the required signatures, retain a copy for your records and send a copy to **Headquarters** at taxinfo@sofn.com.

Lodge Deadline: February 15, 2020

Form may be accessed online at www.sofn.com/local_lodge