## **D17 LOCAL LODGE FINANCIAL STATEMENT**



Lodge Name:	Number:	For Period Ending:	
Income Statement		BALANCE SHEET	
1 Descripto		Assets	Ċ
1. Receipts a. Dues and initiation fees	¢	6. Cash on hand and in bank7. Investments	\$
b. Fundraising	········ Ş	8. Furniture and equipment	
c. Interest and dividends	···········	9. Other	
d. Otherd.		9. Utilet	
u. otilei	Ş	10. Total Assets	Ċ
2. Total Receipts	¢	IU. IUtai Assets	
Z. Iotal Receipts		LIABILIT	IFS
3. Disbursements		11. Loans, if any	¢
a. Community service	¢	12. Other	Ċ
b. Fraternal support	············	12. 00161	γ
c. Capital investment	Ċ	13. Total Liabilities	Ċ
d. other	···········	14. Net Worth line 10 minus line 13	······································
u. otilei		<b>15. Total</b> line 13 plus line 14	
4. Total Disbursements	Ċ	13. 10tal line is plus line 14	
4. Total dispursements		16 Not Worth as of Depart Data item 1/	ahaya ¢
5. Net Gain (Loss) line 2 minus line 4	Ċ	16. Net Worth as of Report Date item 14 17. Net Worth Prior Year-end	anove \$
5. Net Gain (LOSS) line 2 minus line 4	Ş	18. Net Increase (Decrease) line 16 minu	
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	e date
	e Chair, along with the Audit Com bove and find them correct. The	ITING COMMITTEE  Immittee, have audited the books of the Treasurer of information recorded above is also correct and ache remarks on the attached sheet.	
Audit Committee Chair's Name and Member Num		Audit Committee Chair's Signature or acceptance by Headquarters.	date
	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: March 15

Form may be accessed online at www.sofn.com/local\_lodge