

UNIFORM AUDIT REPORT - JUNE 1, 2010 - MAY 31, 2011

Commandery No. _____

Division _____

Starting financial assets as of June 1, 2010

Cash \$ _____	Checking Accounts \$ _____	Savings Accounts \$ _____
CD's \$ _____	Stocks* \$ _____	Bonds \$ _____
		Other \$ _____

1.) Starting balance as of June 1, 2010 -----\$ _____

(Balance on line 1) must be the same as the ending balance of May 31, 2010 and be the sum of all assets listed above

Statement of Receipts

Receipts:

Number of Fees (Creations) _____	Fees @ \$ _____	\$ _____
Number of Regular Current Dues _____	Dues @ \$ _____	\$ _____
Number of Special Current Dues _____	Dues @ \$ _____	\$ _____
Number of Special Current Dues _____	Dues @ \$ _____	\$ _____
Old Life Membership Dues _____	Dues @ \$ _____	\$ _____
New Life Membership Dues _____	Dues @ \$ _____	\$ _____
Number of Previous Years Dues _____	Dues @ \$ _____	\$ _____
Number of Future Years Dues _____	Dues @ \$ _____	\$ _____
Interest and Dividends on Bank Accounts, Savings Accounts, CDs, Bonds, Stocks, etc.		\$ _____
Number of Eye Foundation Assessment Received _____	@ \$1.00	\$ _____
Number Subject to Eye Foundation Assessment _____		\$ _____
Miscellaneous income – (ATTACH A LIST, <i>do not write on this form</i>) -----		\$ _____

Contributions Received:

Eye Foundation -----	\$ _____
Holy Land Pilgrimage -----	\$ _____
Education Foundation -----	\$ _____
Other – (ATTACH A LIST, <i>do not write on this form</i>) -----	\$ _____

2.) Total receipts: (must include all receipts and contributions received listed above) -----\$ _____

3.) Total Available Funds: (sum of line 1 & 2) -----\$ _____

Statement of Disbursements

Disbursements:

Grand Commandery & Grand Encampment Per Capita -----	\$ _____
Bond & Insurance -----	\$ _____
Eye Foundation Assessment @ \$1.00 -----	\$ _____
Rent -----	\$ _____
C.T.A. Expenses -----	\$ _____
Salaries: (Recorder) -----	\$ _____
(Sentinel) -----	\$ _____
(Others) (attach a list if necessary) -----	\$ _____
Paraphernalia -----	\$ _____
Miscellaneous Disbursements – (ATTACH A LIST, <i>do not write on this form</i>) -----	\$ _____

Contributions Disbursed:

Eye Foundation -----	\$ _____
Holy Land Pilgrimage -----	\$ _____
Education Foundation -----	\$ _____
Other – (ATTACH A LIST, <i>do not write on this form</i>) -----	\$ _____

4.) Total Disbursements: -----\$ _____

5.) Balance of all Financial assets as of May 31, 2011: (line 3 minus line 4) -----\$ _____

Cash \$ _____	Checking Accounts \$ _____	Savings Accounts \$ _____
CD's \$ _____	Stocks* \$ _____	Bonds \$ _____
		Other \$ _____
* Do not include Temple Stock.		Sum of two(2) Lines above \$ _____

OVER

Membership of _____ Commandery No. _____ as of June 1, 2010 _____

Additions:

Knighted: -----
Affiliated: -----
Reinstated: -----

Total additions for the year: -----

Deductions:

Demitted: -----
Deaths (reported June 1, 2010 through May 31, 2011) -----
Suspended for Non-Payment of dues: -----
Suspended for Non-Affiliation: -----
Suspended for Unmasonic conduct: -----

Total deductions for the year: -----

Membership as of May 31, 2011 -----

Net Gain or (Loss) in Membership for this Templar Year June 1, 2010 through May 31, 2011 -----

Number of members for whom dues were remitted -----
Number of members in arrears not suspended, why? -----
Number of pural members -----

Number Subject to Eye Foundation Assessment of \$1.00 -----
Number of KTEF Life Sponsors or Patrons -----

(The SUM of these two figures must equal the May 31, 2011 membership total reported)

The committee appointed in accordance with Section 1600, Article 14 of the Uniform Code of By-Laws and Section 1064(b) of the Statutes of the Grand Commandery of Knights Templar of the State of Ohio having performed those duties submits this report of their findings.

Audit Committee Chairman

Audit Committee

Audit Committee

Date

This report must be read at the Annual Conclave in June, two copies sent to the Deputy Division Commander by July 1, 2011. If correct the Deputy will sign and date them and forward one copy to the GRAND RECORDER and one copy back to the recorder.

This report has been reviewed and authenticated by the Deputy Division Commander of this Commandery who affixes his signature here certifying that the information on this form is to the best of his knowledge factual and correct, then sends it to the Division Commander for his signature, who return one copy to the recorder and the second copy to the Grand Recorder.

Deputy Division Commander

Date

Division Commander

Date