

Local Number: _____

Year Reporting: _____



**LOCAL FINANCIAL STATEMENT
YEARLY LOCAL FINANCIAL RECAP**

Income	January	February	March	April	May	June	July	August	September	October	November	December	Total
Dues Received													\$ -
Event Income													\$ -
Product Line Sales													\$ -
Donations Received													\$ -
Other Income													\$ -
TOTALS	\$ -	\$ -	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Expenses	January	February	March	April	May	June	July	August	September	October	November	December	Total
Dues Paid to State													\$ -
Event Expenses													\$ -
Product Line													\$ -
Donations Paid													\$ -
Yearly Obligation Paid													\$ -
Other Expenses													\$ -
TOTALS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Profit or (Loss)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Beginning Balance from Previous Year	
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Ending Balance for Current Year	\$ -
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	January	February	March	April	May	June	July	August	September	October	November	December	EOY Total
Monthly Balance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -