



## AUDIT REPORT

*TREASURER PLEASE COMPLETE THIS FORM. RETURN THIS FORM BY MARCH 1 2026.*

**INCLUDE:** 12 months of bank statements **and** a copy of a voided check.  
Include the signature card if the signers have changed.

**Impact Team Name and No:** \_\_\_\_\_

**Treasurer's Name:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone No:** \_\_\_\_\_

**For the calendar year ended 2025. BALANCE FROM LAST AUDIT REPORT** \$ \_\_\_\_\_

### **RECEIPTS - Funds Received**

Annual Impact Team Operating Expense Funding (COE).....\$ \_\_\_\_\_  
2025 Activity Funding (by completing required activities and Officer Training) .....\$ \_\_\_\_\_  
Hearts & Hands Raised (funds raised by Impact Team) .....\$ \_\_\_\_\_  
Impact Team Additional Funding Event: .....\$ \_\_\_\_\_  
ReLiEF Fund (Seminarist Burse) .....\$ \_\_\_\_\_  
Alzheimer's Support Raised .....\$ \_\_\_\_\_  
All other funds received, include name of activity: .....\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

**TOTAL OF RECEIPTS** \$ \_\_\_\_\_

ADD 'Balance From Last Year's Audit' + 'Total of Receipts' = RECEIPTS **BALANCE** \$ \_\_\_\_\_

### **DISBURSEMENTS - Expenses / Donations**

Hearts and Hands Disbursement (amount disbursed to recipient).....\$ \_\_\_\_\_  
Impact Team Additional Funding Event: .....\$ \_\_\_\_\_  
ReLiEF Fund (Seminarist Burse) .....\$ \_\_\_\_\_  
Alzheimer's Support .....\$ \_\_\_\_\_  
Charitable Donations .....\$ \_\_\_\_\_  
Masses .....\$ \_\_\_\_\_  
All other disbursements, include name of activity: .....\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

**TOTAL DISBURSEMENTS / EXPENSES** \$ \_\_\_\_\_

SUBTRACT 'Receipts Balance' - 'Total Disbursements / Expenses' = \$ \_\_\_\_\_

*This amount should coincide with the checking account statement.*

**FUNDS NOT DISPERSED THROUGH YOUR IMPACT TEAM'S CHECKING ACCOUNT:**

Example: You participate in a local fundraising walk; your team collects donations through the walk's website, funds do not go into the Impact Team's checking account.

Event: _____	Amount raised \$ _____	Amount disbursed \$ _____
Event: _____	Amount raised \$ _____	Amount disbursed \$ _____
Event: _____	Amount raised \$ _____	Amount disbursed \$ _____

**LIST ALL CHECKS ISSUED – BUT NOT CLEARED AS OF 12/31/2025:**

Check # _____	Payee _____	Amount \$ _____
Check # _____	Payee _____	Amount \$ _____
Check # _____	Payee _____	Amount \$ _____
Check # _____	Payee _____	Amount \$ _____
Check # _____	Payee _____	Amount \$ _____

**12 months of bank statements must be submitted with this form with a copy of a voided check. If you have a new President and/or Treasurer, please mail an updated signature card.**

**RESPONSIBILITIES OF THE PRESIDENT AND TREASURER**

The President and Treasurer will audit the books and accounts of the Impact Team every 12 months.

1. All funds of the Impact Team are to be deposited by the Treasurer in an account in the Impact Team's name in a bank approved by the Home Office.
2. Impact Team funds are to be used for the purposes intended and shall not be allowed to accumulate beyond what is necessary to maintain the Impact Team.
3. Impact Team funds are to be used only for conducting the objectives of 1891 Financial Life and for the payment of Impact Team expenses.
4. The Audit Report is to be completed once a year, for the period ending December 31.
5. One copy must be received in the Home Office no later than March 1.  
Retain one copy for the Impact Team's records.
6. All receipts and disbursements of the Impact Team (adult and junior), and all funds of the Impact Team are included in this report.

The signatures below certify that we have examined the books, vouchers, receipts, and bankbooks and find them to balance in every respect:

**Name (please print)**

**Date**

**Signature (two signatures required)**

President \_\_\_\_\_

Treasurer \_\_\_\_\_



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**Impact Team Name and No:** \_\_\_\_\_

**Treasurer's Name:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone No:** \_\_\_\_\_

**For the calendar year ended 2025. BALANCE FROM LAST AUDIT REPORT \$** \_\_\_\_\_

### **RECEIPTS - Funds Received**

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All other funds received, include name of activity: .....\$ \_\_\_\_\_  
.....\$ \_\_\_\_\_  
.....\$ \_\_\_\_\_  
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**TOTAL OF RECEIPTS \$** \_\_\_\_\_

ADD 'Balance From Last Year's Audit' + 'Total of Receipts' = **RECEIPTS BALANCE \$** \_\_\_\_\_

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.....\$ \_\_\_\_\_  
.....\$ \_\_\_\_\_  
.....\$ \_\_\_\_\_  
.....\$ \_\_\_\_\_  
.....\$ \_\_\_\_\_

**TOTAL DISBURSEMENTS / EXPENSES \$** \_\_\_\_\_

SUBTRACT 'Receipts Balance' - 'Total Disbursements / Expenses' = **\$** \_\_\_\_\_

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Treasurer \_\_\_\_\_