



Ordo Templi Orientis LOCAL BODY FINANCIAL REPORT

PAGE 1 OF

SUBMIT TO: Grand Treasurer General
Ordo Templi Orientis USA
P.O. Box 45139
Los Angeles, CA 90045-0139

Body Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Master: _____

Phone: _____ E-mail: _____

Treasurer: _____

Phone: _____ E-mail: _____

Reporting Requirements

Camps Annual

Oases, Lodges, and Chapters Quarterly

Our fiscal year begins: _____

This report is for fiscal year: _____

Annual Report

Quarter 1

Quarter 2

Quarter 3

Quarter 4

I attest that this report is true and correct to the best of my knowledge.

Treasurer Signature: _____ Date: _____

Master Signature: _____ Date: _____

Report Prepared by: _____ (print)

Ordo Templi Orientis

LOCAL BODY FINANCIAL REPORT

PAGE OF

BODY NAME: _____

JOURNAL

PERIOD: YR Q1 Q2 Q3 Q4

FISCAL YEAR: _____

BODY NAME: _____

INCOME & EXPENSES PERIOD: YR Q1 Q2 Q3 Q4 FISCAL YEAR: _____

Income

National Dues	
Initiation Fees	
Local Dues	
Donations	
Sales (Attach Detail)	
Other *	=====

Expenses

National Dues	
Initiation Expenses	
Temple Equipment/Furn.	
Copying	
Postage	
Office Supplies	
Telephone	
Advertising	
Other *	=====

Totals _____ - _____ = \$ _____

Beginning Balance + \$ _____

Ending Balance = \$ _____

* Must be less than \$100. For other income/expenses, list as a separate category in the space above.