Alpha Epsilon Delta

The Health Preprofessional Honor Society

Annual Financial Audit Report

College/ University | AED Chapter (State Greek Letter-not symbol) | Calendar Year

Initiation Dates	Number of Memberships: Student+Honorary			
M/D/Yr	(Affiliate-Ch)	(Student-National)	(Honorary)	Total

Beginning Year Account/s: Balance as of January 1, _____ $ _____

Revenues	Itemized Descriptions:		
		$	
		$	
		$	
		$	
		$	
		$	
		$	
	Revenue Subtotal	$	0
Expenses	Itemized Descriptions		
		$	
		$	
		$	
		$	
		$	
		$	
		$	
	Expense Subtotal	$	0

Beginning Year Account/s: Balance as of December 31, _____ $ _____

We certify the above Financial records of our AED Chapter for the period stating January 1, 20__ and ending December 31,20__ were audited by the following:

Committee ☐ Chapter Advisor ☐ Other: _____

Typed Name of Chapter President | Signature of Chapter President | Date

Typed Name of Chapter Advisor | Signature of Chapter Advisor | Date

Please remember that the "new" Treasurer (the Treasurer for the upcoming school year) must be informed of all chapter financial matters, i.e., signature changes, checking /saving account/s, carryover of funds, etc.

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