

TRUSTEE'S REPORT OF AUDIT of

The Books and Records of the Quartermaster and Adjutant of _____
(District/County Council/Post No.)

Department of Texas for the Fiscal Quarter ending _____ 20_____

Fiscal Quarters Jan 1 to March 31 April 1 to June 30 July 1 to Sept. 30 Oct 1 to Dec. 31

FUNDS	10. Net Cash Balances at Beginning of Quarter	11. Receipts During Quarter	12. Expenditures During Quarter	13. Net Cash Balance at End of Quarter
1. National and Department Dues (Per Capita Tax)	\$	\$	\$	\$
2. Admission or Application Fees (Department)				
3. Post General Fund				
4. Post Relief Fund (Poppy Profits, Donations, etc.)				
5. Post Dues Reserve Fund (See Sec. 218 Manual of Procedure)				
6. Post Home or Building Fund (Including Savings but not Real Estate)				
7. Post Canteen or Club Fund				
8. Other				
9. Bonds and Investments Not Credited to Funds				
14. Totals	\$	\$	\$	15. \$

16. OPERATIONS	
Have required payroll deductions been made?	
Have payments been made to the proper State & Federal agencies this quarter?	
Have Sales Taxes been collected and paid?	
Are Club employees bonded?	
Amount of outstanding bills?	\$
Value of Real Estate?	\$
Amount of Liability Insurance?	\$
Owed on Mortgages and Loans?	\$
Value of Personal Property?	\$
Amount of Property Insurance?	\$

17. RECONCILIATION OF FUND BALANCES	
Checking Account Balance	
Less Outstanding Checks	
Actual Balance	
Savings Account Balance	
Cash on Hand	\$
Total	\$
Bonds & Investments (Cost Value)	\$
Total	\$

18. TRUSTEE'S & COMMANDERS CERTIFICATE OF AUDIT

Date _____, 20_____

This is to certify that we (or qualified accountants) have audited the books and records of the Adjutant & Quartermaster of _____
(District/County Council/Post No.)

For the Fiscal Quarter ending _____ in accordance of the National By-Laws and this Report is a true and correct statement thereof to the best of our knowledge and belief. All Vouchers and checks have been examined and found to be properly approved and checks properly countersigned:

Post Quartermaster _____
(Name)

Signed: _____ Trustee

Signed: _____ Trustee

(Address)

Signed: _____ Trustee

This is to certify that the Office of the Quartermaster is Bonded with _____ in the amount of \$ _____ until _____, 20_____, and that this Audit is correctly made out to the best of my knowledge and belief

Signed: _____ Commander

NOTE: Forward Original Copy to your Department Quartermaster—See instructions on next page.