SAMPLE AUDIT REPORT

Annual chapter audits are encouraged but not required. This form is provided as a **suggested** report format. Please send chapter audit reports to the address at the bottom of this form or chapters@pdkintl.org.

An audit includes examining, on a test basis, evidence supporting the records of receipts and disbursements. An audit also includes assessing the internal controls and procedures related to finances that have been developed by the chapter. These procedures may include the preparation of a budget with spending limits and the approval process for spending chapter funds.

One or more chapter members or a third party individual/group may conduct a chapter audit. Chapters **ARE NOT** required to hire a CPA or financial professional to check chapter financial records, although they may elect to do so if they wish.

Chapter Name		Chapter Number	
	nancial records are the responsibility of inion of the financial records based on	the chapter treasurer. My/our responsibility is to express an our audit.	
		of the above-named chapter for the fiscal year ending ist of the following (check all records that were audited):	
	Beginning-of-year reconciled bank ba	alance	
	Record of cash receipts		
	Record of cash disbursements		
	End-of-year reconciled bank balance		
	Other (please specify):		
Au	udit opinion (check one):		
		y/our opinion, the financial records of the above-named chapter accurately reflect the d disbursements for the fiscal year identified above.	
		: In my/our opinion, the financial records of the above-named chapter accurately reflect the and disbursements for the fiscal year identified above, with exceptions as described in ched narrative/documentation.	
	reflect the receipts and disbursement	Iverse: In my/our opinion, the financial records of the above-named chapter do not accurately flect the receipts and disbursements for the fiscal year identified above. Our opinion is based a evidence in the attached narrative/documentation.	
Sig	gnature:	Date:	
Pri	inted Name:		
Signature:		Date:	
Pri	inted Name:		
Signature:		Date:	
Pri	inted Name:		