

PTA AUDIT/FINANCIAL REVIEW FORM



Name of Unit: _____ Date: _____

Council/Region: _____ Unit Treasurer: _____

Dates covered by this audit/financial review: _____ through _____

- 1. Balance on hand (from date of last audit) \$ _____
- 2. Deposits (from last audit to this audit date) \$ _____
- 3. Total Cash (Add lines 1 and 2) \$ _____

- 4. Disbursements (from last audit to this audit date) \$ _____

- 5. Total Balance on Hand (Subtract Line 5 from Line 4) \$ _____

- 6. Bank Statement Balance as of _____ (date of audit) \$ _____
- 7. Checks Outstanding (list check # and amount):

- 8. Total Outstanding Checks \$ _____

- 9. Balance in Checking account (subtract line 8 from line 6) \$ _____

Note: Amounts in Line 5 and Line 9 should be the same

Please check one:

_____ I/We have audited the books and found them to be correct.

_____ I/We have audited the books and found the following problems and/or make the following
 Recommendations (attach additional pages if necessary):

Auditors' Signatures:



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AUDIT WORKSHEET

Start the audit by noting the balance on hand at the date of the last audit. Verify that the amount listed on the audit report is the amount listed in the register and on the bank statements. You will need all information as outlined in the "PTA Audit Cover Letter".

- | | |
|---|----------|
| 1. Do a sample test of transactions. | Initials |
| a. Is there a voucher and bill/receipt for each check written? | |
| b. Are there 2 signatures on each check? | _____ |
| 2. Look at Bank statements (12 months) | |
| a. Have they been reconciled? | |
| b. Have they been checked by another PTA Member? | _____ |
| 3. Trace all cash verification forms to bank deposits | |
| a. Is there a deposit slip for each deposit? | |
| b. Are the monies put in the correct budget category? | _____ |
| 4. Account for all returned and voided checks | |
| a. Recorded properly? | |
| b. Were they followed up on? | _____ |
| 5. Verify balances in all bank accounts | _____ |
| 6. Determine if IRS form 990 was filed | _____ |
| 7. Compare total deposits according to the bank to deposits recorded | |
| a. Do they match? | _____ |
| 8. Compare total debits according to the bank to debits recorded | |
| a. Do they match? | _____ |
| 9. Compare the total expenditures to the budget and minutes | |
| a. Were all expenditures recorded? | |
| b. Were expenditures used as allocated in the budget? | _____ |
| 10. Check that monthly deposits for dues were collected and forwarded | |
| To Kansas PTA. The Kansas PTA/National PTA portion of dues | |
| Collected should be recorded separately from the associations. | _____ |

I/We do hereby verify that the above procedures have been performed. Remarks and exceptions are noted below (attach a separate sheet of paper if needed):

Auditors' Signatures:

PTA Audit Cover Letter



To: Auditor/Audit Committee

Thank you for agreeing to perform an audit/financial review of the books of the _____ PTA/PTSA. The purpose of this audit/financial review is to certify the accuracy of the books and records of the financial officers and to assure the membership that the Association's resources/funds are being managed in a businesslike manner within the regulations established for their use. To facilitate this process, I have supplied **ALL** of the following items and will supply any other information as requested:

- Copy of last year's audit report
- Checkbook and cancelled checks
- Bank statements and deposit receipts
- Treasurer's book (sometimes called cash book or ledger)
- The annual financial report
- All Treasurer's Reports
- Itemized statements and receipts of bills paid
- Check requests (Vouchers)
- Adopted budget and any amendments that were approved by the membership during the year
- Current Bylaws
- Current Standing Rules
- Copies of board, executive committee and association minutes

The auditor/audit committee report must be in writing. If the audit committee finds there are not adequate records or inappropriate accounting procedures used, this information should be noted on an attached recommendations page.

Current Treasurer's Signature _____ Date: _____

Email: _____ Phone: _____

Please contact the new Treasurer when the audit is complete. Thank you again for rendering your services.

Incoming Treasurer: _____

Email: _____ Phone: _____