

## 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 – 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 or 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				
<b>14. Totals</b>				<b>15.</b>

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 believe. All Vouchers and checks have been examined and found to be properly approved and checks properly countersigned:

Post Quartermaster \_\_\_\_\_  
(Name)  
\_\_\_\_\_  
(Address)

Signed: \_\_\_\_\_ Trustee

Signed: \_\_\_\_\_ Trustee

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