



TRUSTEES' REPORT OF AUDIT of

The Books and Records of the Quartermaster and Adjutant of _____

Department of MAINE 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.				
9.				
10.				
11.				
12. Bonds and Investments Not Credited to Funds				
14. TOTALS:				

16. OPERATIONS	17. RECONCILIATION OF FUND BALANCES
Have required payroll deductions been made? <input type="checkbox"/> Yes <input type="checkbox"/> No	Checking Account Balance _____
Have payments been made to the proper State	Less Outstanding Checks _____
And Federal Agencies this Quarter? <input type="checkbox"/> Yes <input type="checkbox"/> No	Actual Balance _____
Have sales taxes been collected and paid? <input type="checkbox"/> Yes <input type="checkbox"/> No	Savings Account Balance _____
Are club employees bonded? <input type="checkbox"/> Yes <input type="checkbox"/> No	Cash on Hand _____
Amount of Outstanding Bills _____	Total _____
Value of Real Estate _____	Bonds and Investments (cost value) _____
Amount of liability insurance _____	Total _____
Owed of mortgages and loans _____	
Value of Personal Property _____	
Amount of Property Insurance _____	

18. TRUSTEES' AND COMMANDERS CERTIFICATE OF AUDIT

Date _____, 20__

This is to certify that we (or qualified accountants) have audited the books and records of the Adjutant and Quartermaster of _____ for the Fiscal Quarter ending _____ in accordance with the National By-Laws and that 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

Signed _____ Trustee

(Address)

This is to certify that the Office of the Quartermaster is bonded with _____ in the amount of _____ until _____, 20__, and the Audit is correctly made out to the best of my knowledge and belief.

Signed _____ Commander