



DUVAL COUNTY PUBLIC SCHOOLS
OUTSIDE SCHOOL-RELATED ORGANIZATION
ANNUAL AUDIT REPORT

(SCHOOL YEAR)

ORGANIZATION NAME: _____ FEDERAL I.D. #: _____

Beginning Book Balance (as of June 30th of prior year): \$ _____

Total Receipts: (+) \$ _____

Total Disbursements: (-) \$ _____

Ending Book Balance (June 30th): \$ _____

Outstanding Checks (Attach detailed list): (+) \$ _____

Checking Account Balance (June 30th): *per bank statement* \$ _____

Saving Account Balance (June 30th): *per bank statement* \$ _____

This is to certify that the financial records of the _____ (organization name) have been examined by the undersigned auditing committee or external auditor and that all disbursements were properly made and with the required authorization. The undersigned also certifies that the above ending bank balance is correct.

NOTE: This includes all cash accounts: Checking, Savings, Money markets, Certificates of Deposit, etc. Copies of the applicable Bank Statements are attached.

Date _____ /S/ _____

/S/ _____

/S/ _____

Verified by Bookkeeper: /S/ _____ Date: _____

Principal: /S/ _____ Date: _____

It is the recommendation of Internal Auditing that the Audit Committee be made up of a minimum of three members of the organization (excluding treasurer) or that the audit be conducted by an external auditor.

****Complete and give to the bookkeeper for processing. June 30th Bank Statement(s) must be attached. ****