



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

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

Beginning Book Balance (as of June 30 th of prior year):	\$	
Total Receipts:	(+)	\$ _____
Total Disbursements:	(-)	\$ _____
Ending Book Balance (June 30 th):	\$	_____
Outstanding Checks (Attach detailed list):	(+)	\$ _____
Checking Account Balance (June 30 th): <i>per bank statement</i>	\$	_____
Savings Account Balance (June 30 th): <i>per bank statement</i>	\$	_____

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 _____ Committee members, please sign and print your name below.

/S/ _____ /P/ _____

/S/ _____ /P/ _____

/S/ _____ /P/ _____

/S/ _____ /P/ _____

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****

Revised 04.23.2019