TRUSTEE'SREPORTOFAUDIT

of the Books and Records of the Quartermaster and Adjutant of _____ (District/Post No.)

Department of Texas for the Fiscal Quarter ending 1st Qtr (July 1 to Sept. 30) 2018

Fiscal Quarters Jan1 to March 31 | April 1 to June 30 | July 1 to Sept. 30 | Oct 1 to Dec. 31

FUNDS as recorded in ledger	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)	90.24	2,365.50	3,006.20	(550.46)
2. Admission or Application Fees (Department)		2,195.00	1,147.82	1,047.18
3. Post General Fund		533.24	873.98	(340.74)
4. Post Relief Fund (Poppy Profits, Donations, etc.)				0.00
5. Post Dues Reserve Fund (See Sec. 218 Manual of Procedure)				0.00
6. Post Home or Building Fund (Including Savings but not Real Estate)				0.00
7. Post Canteen or Club Fund				0.00
8. Other				0.00
				0.00
Savings				0.00
Cash on Hand				0.00
9. Bonds and Investments Not Credited to Funds				0.00
14. Totals	90.24	5,093.74	5,028.00	15. 155.98

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 BANK BALANCES

Checking Account

Ending Balance Per Bank Statement _____

Less: Outstanding Checks (-) _____

Plus: Deposits in Transit _____

Actual Balance $ 0.00

Savings Account

Ending Balance Per Bank Statement _____

Less: Outstanding Checks (-) _____

Plus: Deposits in Transit _____

Actual Balance $ 0.00

Cash on Hand _____

Bonds & Investments (Cost Value) _____

Total of All $ 0.00

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/Post No.)

For the Fiscal Quarter ending 1st Qtr (July 1 to Sept. 30) in accordance of the National By-Laws and 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)

_____

(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

NOTE: Forward Original Copy to your Department Quartermaster.

PPD_00059