

## Local Unit Audit Report

An audit for \_\_\_\_\_, on record with EIN, \_\_\_\_\_ was completed on \_\_\_\_\_ by \_\_\_\_\_.

The audit was presented to the \_\_\_\_\_ board on \_\_\_\_\_ and adopted by the general membership on \_\_\_\_\_.

The audit period was from \_\_\_\_\_ to \_\_\_\_\_. The date of the last audit was \_\_\_\_\_. A Form 990 will be filed with IRS on or before \_\_\_\_\_.

Council Membership: \_\_\_\_\_ District: \_\_\_\_\_

Signed: \_\_\_\_\_ Signed: \_\_\_\_\_  
 President Treasurer  
 AM phone number: (\_\_\_\_) \_\_\_\_\_  
 PM phone number: (\_\_\_\_) \_\_\_\_\_  
 Email: \_\_\_\_\_

**AUDITOR or AUDIT COMMITTEE:**

The records of the treasurer of \_\_\_\_\_ are correct.

The records of the treasurer of \_\_\_\_\_ were found to be inadequate to complete the audit after attempting to locate missing records. Please see attached comments.

<p><b>Auditor:</b></p> <p>Signed: _____</p> <p>Printed Name: _____</p> <p>Organization: _____</p> <p>Address: _____</p> <p>Phone number: _____</p>	<p><b>Audit Committee:</b></p> <p>Signed: _____                      Audit Committee Chair</p> <p>Signed: _____                      Audit Committee Member</p> <p>Signed: _____                      Audit Committee Member</p>
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*(Space below for use by the VAPTA Treasurer or designee only).*

Verified as a valid local unit audit by: \_\_\_\_\_

Print Name:

Signature

Date: \_\_\_\_\_



**Audit Report for:** \_\_\_\_\_ **EIN:** \_\_\_\_\_  
**Per Member Dues for** \_\_\_\_\_ **(year)** \_\_\_\_\_ **(amount)**

The following audit information is submitted to the Virginia PTA as the annual audit of this association.

<b>1. Beginning Balance</b>		\$
<b>2. Receipts</b>	<i>Total of all receipts and credits.</i>	\$
<b>3. Add line 1 and line 2:</b>		\$
<b>4. Expenses</b>	<i>Total of all checks written and debits</i>	\$
<b>5. Subtract line 4 from line 3 for "BALANCE ON HAND"</b> <i>(Should match check register)</i>		\$

**OUTSTANDING CHECKS AND DEPOSITS:**

<b>6. Balance on Last Bank Statement:</b>		\$
Check #	Payable to: Amount	
TOTAL OUSTANDING CHECKS: \$		
<b>Outstanding Checks:</b>		
<b>7. Subtract total for Outstanding Checks from Line 6.</b>		\$
<b>Outstanding Deposits</b>		
Source of Deposit	Amount	
TOTAL OUTSTANDING DEPOSITS: \$		
<b>8. Add total Outstanding Deposits to Line 7.</b>		\$
<b>9. Enter amount in line 8 to verify "BALANCE ON HAND"</b> <i>Should match check register and amount in Line 5.</i>		\$

**Auditor or Audit Committee Comments:**

*The auditor or audit committee may include any comments, recommendations or concerns in this section or attach separately to the audit report for consideration by the incoming treasurer and/or local unit board.*

## Instructions for Completing the Local Unit Audit Report

*This format is not intended for electronic fill-in. If you prefer to fill in the report from your computer, download the electronic version from the FORMS section at [www.vapta.org](http://www.vapta.org) MEMBERS ONLY.*

### **Cover Sheet Instructions:**

The cover sheet is required. Fill in all information above the line.

1. Enter the name of your local unit, include PTA or PTSA.
2. Enter your Employee Identification Number (EIN)
3. Enter the date of the audit and who performed the audit. Enter only the auditor name or if an auditing committee was used, simply insert 'auditing committee'.
4. Enter the name of your local unit, the date presented to the PTA board and the date adopted by the general membership. The audit MUST be adopted by your membership at a general meeting.
5. Enter the beginning and end date of your audit period.
6. Enter the date of the last audit.
7. If you are a member of a Council, enter the name of the Council and enter the name of your District. If you are not sure what district your local unit is in, refer to the website or email [info@vapta.org](mailto:info@vapta.org) with your local unit name and city or county.
8. Enter the President's contact information
9. If you used an AUDITOR, enter their printed name, organization/company, address and phone number. The auditor will sign the final report. If you used an audit committee, have the committee members sign the final report.
10. Have the auditor or auditing committee chair check the appropriate box to state the audit is correct or that the records are inadequate to complete an audit after every attempt to account for missing records. If the records are inadequate, the auditor or auditing committee must include in the comments a list of what is missing and recommendations on how to prepare for the next audit.
11. Make sure you have all signatures. Send the report to:

Virginia PTA, Attention: Audits  
1027 Wilmer Ave  
Richmond, VA 23227-4019

### **Report Instructions:**

Provide the amount for each line. If the number of outstanding checks exceeds the space available, annotate in the last space for checks, 'continued on a separate piece of page', however make sure the total in last line is the total for all checks. If the number of outstanding deposits is greater than the number of space, do the same as for outstanding checks. Attach any separate sheets.

Line 9 should be the same as line 5.

### **Comments Instructions:**

If the auditor or audit committee has recommendations, concerns or comments, please type in this space.

Questions? Email: [treasurer@vapta.org](mailto:treasurer@vapta.org) or if email is unavailable, call 1-866-4vakids for further assistance.