AUXILIARY AUDIT REPORT

Mail one copy to:	Auxiliary No. _____
Ladies Auxiliary VFW **326 E. Burrows St.** **Tucson, AZ 85704**	**Location:** _____

Sec. 814 “All Audits are to be completed by the elected Trustees, with a minimum of two (2) in attendance. The President, Secretary and Treasurer should attend the audit."

DISTRIBUTION OF RECEIPTS, DISBURSEMENTS, AND CASH BALANCE BY FUND

For the Period From _____ **thru** _____

FUND	CASH BALANCE LAST REPORT	RECEIPTS	DISBURSEMENTS	CASH BALANCE THIS REPORT
Aux. General Fund				
Dept/Natl Dues				
Restricted Cancer Insurance				
Relief Fund				
TOTALS				
Savings/Investment A/C if not included above				
TOTAL BALANCE ALL FUNDS				

Outstanding Checks			Date	Ck No.	Amount
Date	Ck No.	Amount			
			Total O/S Checks		

Outstanding Deposits	
Date	Amount
Total O/S Deposits	

This is to certify that the books of the Secretary and Treasurer have been audited, found correct and all moneys properly accounted for.

Date Audited:

_____

Trustee 1 Yr.

_____

Trustee 2 Yr.

_____

Trustee 3 Yr.

_____

Bank Statement	
Plus Outstanding Deposits	
Less Outstanding Checks	
TOTAL BALANCE	
Savings/Investment A/C Funds	
TOTAL FUNDS	