

## LADIES AUXILIARY TO VFW DEPARTMENT OF VIRGINIA AUDIT REPORT

AUXILIARY NO. \_\_\_\_\_ DISTRICT NO. \_\_\_\_\_ FOR CALENDAR YEAR \_\_\_\_\_

Please Circle which Quarterly Audit is being submitted:

QUARTER	PERIOD COVERED	MUST BE COMPLETED BY	MAILED TO DEPT. TREASURER BY
1st	January 1-March 31	April 15	April 30
2nd	April 1-June 30	July 15	July 31
3rd	July 1- September 30	October 15	October 31
4th	October 1-December 31	January 15	January 31

### DISTRIBUTION OF RECEIPTS, DISBURSEMENTS AND CASH BALANCE BY FUND

FUND	CASH BALANCE LAST REPORT	RECEIPTS	DISBURSEMENTS	CASH BALANCE THIS REPORT
Auxiliary General Fund				
Dept/Natl. Dues Restricted)				
Cancer Ins. (Restricted)				
Aux. Relief Fund (Restricted)				
Kitchen/Bingo Fund				
Other				
SUB-TOTAL				
Jr. Girls Unit Fund				
TOTALS:				
Savings Account				
TOTAL BALANCE				

Bank Balance as shown on Bank Statement: \$ \_\_\_\_\_  
 Less Outstanding Checks: Numbers: # \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Total Amount of Outstanding Checks: \$ \_\_\_\_\_

Add Total Amount of Outstanding Deposits: \$ \_\_\_\_\_

Total Adjusted Bank Balance: \$ \_\_\_\_\_

<p>This is to certify that the books and records of the Treasurer and Secretary have been audited, found correct, and all money properly accounted for.</p>	<p>TRUSTEES SIGNATURES:</p> <p>#1 _____</p> <p>#2 _____</p> <p>#3 _____</p> <p>AUDITED THIS DATE: _____</p>	<p>DISTRIBUTION:</p> <p>Original to: Auxiliary Secretary after the Senior Trustee has read</p> <p>Copy to: Auxiliary Treasurer</p> <hr/> <p>Must mail a copy to DEPARTMENT TREASURER:</p> <p style="text-align: center;">Mary Richards          6351 Tappahannock Drive          Norfolk, VA 23509</p>
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