

VFW AUXILIARY DEPARTMENT OF VIRGINIA AUDIT REPORT

AUXILIARY # _____ DISTRICT # _____ FOR CALENDAR YEAR _____

Please Circle which Quarterly Audit that is being Submitted

Quarter	Months Covered	Audit Completed By	Approved Audit sent to Department Treasurer no later than
1ST	Jan 1 - March 31	April 30 Annually	May 31, Annually
2ND	April 1 - June 30	July 31, Annually	August 31, Annually
3RD	July 1 - Sept 30	October 31 Annually	November 30, Annually
4TH	Oct 1 - Dec 31	January 31, Annually	February 28, Annually

Auxiliary Vote

Approved Audit:
Date: _____

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)				
Aux Relief Fund (Restricted)				
Cancer Ins. (Restricted)				
Kitchen/Bingo Fund				
Other				
TOTALS:	\$	\$	\$	\$
Savings Account				
TOTAL BALANCE	\$	\$	\$	\$

Outstanding Check Number	Amount
TOTAL	

Bank Balance as shown on Bank Statement: \$ _____

Total Amount of Outstanding Checks: \$ _____

Add Total Amount of Outstanding Deposits: \$ _____

Total Adjusted Bank Balance: \$ _____

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

TRUSTEES SIGNATURES:

- #1. _____
- #2. _____
- #3. _____

Audited this Date: _____

DISTRIBUTION:

Original to Auxiliary Secretary after the Senior Trustee has read.
Copy to the Auxiliary Treasurer

Must mail copy to Department Treasurer:

Cathy Graham
9691 Lindenbrook St
Fairfax, 22031-1132
cg12dc12@outlook.com