

PTA AUDIT/FINANCIAL REVIEW FORM (PAGE 1 OF 3)



Purpose: To remain in compliance with the bylaws, be in good standing and to verify funds raised and spent by the unit.

Instructions:

- The Board of Directors must select an auditor or auditing committee no later than two weeks prior to the end of the school year. Refer to Bylaws, Article VII, Section 4.
- The treasurer shall submit to the auditor(s) all financial records and forms listed below.
- Local units and councils should scan and email the audit/financial review form to audit990@georgiapta.org if possible. Otherwise, please mail to Georgia PTA, 114 Baker St. NE, Atlanta, GA 30308-3366. Audits must be sent in by the last business day in September. You must also send a copy to your local council, if applicable, or to your district Director if there is no council.

Date <u>7/19/17</u>		PTA Local Unit ID# <u>1710593</u>	
District <u>12</u>	Council <u>Area 1</u>	PTA Name <u>Area 1 Gwinnett County Council of PTAs</u>	
Contact Person <u>Angela Banks - Spain</u>		PTA Position <u>Treasurer</u>	
Address <u>3375 Centerville Hwy #391181</u>		City <u>Snellville</u>	
State <u>GA</u>	Zip <u>30039</u>	Email <u>secretaryforarea1@gmail.com</u>	
Cell Phone <u>(678) 596-4805</u>		Home Phone <u>(770) 979-4560</u>	

Auditor/Auditing Committee: Please complete all sections.

Year 20 16 - 20 17

PTA, please mark PTA boxes in Section A for documents you are providing.

Section A: Please check all Financial records provided

PTA	Auditor
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

- Checkbook register (a listing of all checks)
- All bank statements
- All funds verification forms and deposit slips
- All check request forms with receipts/bills attached
- All treasurer's reports
- Adopted budget and approved amendments
- Copies of all minutes (board, executive and general)
- Copy of local unit bylaws

PTA	Auditor
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

- General ledger report (list all receipts/disbursements)
- The annual financial report (profit and loss statement)
- Cancelled checks or bank images from bank statement
- Copy of insurance
- Itemized statements and receipts of bills paid
- Copy of last year's audit report and 990 or 990N
- Copy of the final bank statement for the last audit period

Section B: To be completed by the Auditor ONLY

Y N

- a. Does the amount shown on the first bank statement (adjusted for outstanding checks and deposits) correspond to the starting balance recorded in the checkbook register, ledger, treasurer's reports and ending balance of the last audit?
- b. Were the bank statements reconciled monthly by the treasurer and signed by the president and another person not authorized to sign checks or related to the signers?
- c. Did all checks written contain two (2) signatures? President, treasurer or one another elected officer?
- d. Were all checks properly recorded in the checkbook register, ledger or treasurer's reports?
- e. Were all bank charges and interest recorded in the checkbook register, ledger and treasurer's reports?
- f. Did the PTA purchase insurance?
- g. Were all authorizations approved by the president or their designee and contain receipts?
- h. Did the PTA make payments by a PTA credit or debit card?
- i. Did the PTA use the Funds Verification Forms?
- j. Were all funds received counted by two persons with the treasurer being the third counter?
- k. Did the funds received match the deposits recorded in the checkbook register, ledger and treasurer's reports?
- l. If the PTA accepts payment by credit/debit cards (e.g. PayPal) are those funds reconciled and posted in the register?
- m. Did you receive a copy of the approved/amended budget?
- n. Was the income spent according to the approved/amended budget?
- o. Did the general meeting minutes contain budget approval?
- p. Did the general meeting minutes include all budget amendments?
- q. Did the general meeting minutes include the audit report approval?
- r. Do the membership numbers match? N/A # of memberships collected? _____ # of membership dues submitted to the state?

Please contact and return the completed audit to the new incoming treasurer. The outgoing treasurer needs to sign the audit form before handing over to the auditor/audit committee.

Outgoing Treasurer's Signature Angela Banks - Spain Date 7/19/17
 Outgoing Treasurer's Daytime Phone (678) 596-4805 Email secretaryforarea1@gmail.com
 Incoming Treasurer's Name Shantelle Grace Daytime Phone (254) 654-1029 Email bluebonnet-hill@att.net

PTA AUDIT/FINANCIAL REVIEW FORM (PAGE 2 of 3)



Year 20 16 - 20 17

Date 7/30/2017

PTA Name AREA 1 Gwinnett City Council of PTA's PTA LU ID # 1710593

Council AREA 1 District 12

Dates covered by this audit/financial review from: _____ to: 6/30/2017

Balance on Hand (From Date of Last Audit)..... \$ 4510.04

Receipts (From last audit to date of audit)..... \$ 9541.08

Total Cash (add 1 and 2 together)..... \$ 14,051.12

Disbursements (From last audit to date of audit)..... \$ 7282.71

Balance on Hand (Date of Audit, subtract line 4 from line 5)..... \$ _____

Bank Statement Balance as of 6/30/17 (date)..... \$ 7,393.41

Checks Outstanding (List check number and amount)

Check #	Amount	Check #	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Outstanding Checks..... \$ _____

Balance in Checking Account (Subtract line 8 from line 6)..... \$ 7,393.41

Note: Amounts on line 5 and 9 should be the same.

Only one line can be checked, if there are any findings (even minor) line 2 must be checked:

- I (We) have audited the books and find them to be correct.
- I (We) have audited the books and found the following problems and/or make these suggestions. Problems/suggestions must be noted on page 3 of the audit form.
- I (We) have audited the books and found significant problems that must be reported to the district PTA immediately for assistance. Please document finding on page 3 of the audit form.

<u>Alicia L Balmer</u> Auditor/Reviewer Signature	_____ Auditor/Reviewer Signature	_____ Auditor/Reviewer Signature
<u>Alicia L Balmer</u> Auditor/Reviewer Printed Name	_____ Auditor/Reviewer Printed Name	_____ Auditor/Reviewer Printed Name
<u>404) 384-4248</u> Auditor/Reviewer Phone Number	_____ Auditor/Reviewer Phone Number	_____ Auditor/Reviewer Phone Number
<u>Nafaria Hewley</u> Outgoing President's Signature (mandatory)	<u>Angela Bomb-Sain</u> Outgoing Treasurer's Signature (mandatory)	<u>8/2/17</u> Date

The auditor/auditing committee report must be in writing and submitted with the audit. If the auditor/committee finds there are not adequate records or inappropriate accounting procedures used, this information should be noted.

Note: A copy of the Financial Review/Audit must be submitted to Georgia PTA by the last business day in September. Once the appropriate 990 is filed with the IRS, please submit the IRS filing verification form and appropriate documents to Georgia PTA.

PTA AUDIT/FINANCIAL REVIEW FORM (PAGE 3 of 3)



Year 20 16 - 20 17

Date 7/30/2017

PTA Name AREA 1 Gwinnett City Council of PTA's LU ID # 1710593

Council AREA 1 District 12

This page must be completed if any of the following occur:

- Any of the required documents from section A are not provided.
- Any of the boxes in section B are marked with a no.**
**Exception: letter h. Did the PTA make payments by a PTA credit or debit card? Should be no, if yes must be noted.
- If line 2 or 3 are marked on page 2.