

ACCOUNTANT TRUST ACCOUNT AUDIT QUOTE FORM



Company: _____

Contact Person: _____

Address: _____

Phone: _____ e-mail: _____

General Details:

- For what purpose do you maintain the trust account/s and where are they held:

Account	Purpose	Bank

- Are the records maintained through a computerized system: Yes / No
- If yes, what system is utilized: _____
- How do you file and maintain trust account records? _____
- Are these easily accessed? Yes / No
- How often are trust accounts reconciled to the bank statements? Daily /Weekly /Monthly /Other
- Do you ever invest trust account funds on behalf of clients? Yes / No

Receipts

- What type of receipts are issued? Manual / Electronic / Both
- How many receipts are issued annually? _____
- Do you retain copies of all receipts issued? Yes / No

Payments

- What type of payment are made? Cheque / EFT / Both
- How many payments are made each year? _____
- Do you retain cheque butts and copies of all EFT transactions? Yes / No