

Year End Audit/ACFR Schedules

Fiscal Year: _____

Schedule Number: _____

Schedule Name: _____

<u>Phone Ext.</u>	<u>Date Completed</u>	<u>Revised Date</u>
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Approved by Bureau

Audit Lead: _____

I have reviewed this schedule and the information provided on the cover sheet below. I confirm it is: (1) materially accurate and complete, (2) all items exist and are properly classified, (3) proper fiscal year-end cutoff has been performed, and (4) it reconciles to the subject SAP account balance(s) as of the date this audit schedule was prepared and reviewed as indicated above.

Specifically for the capital asset inventory, I confirm that our bureau has made a good faith effort to locate real property records (i.e. land and buildings) not in SAP, and confirm ownership of real property in SAP.

Final Review if needed: _____

Electronic File Name: _____

Comments: _____