

# AUDITEE QUESTIONNAIRE

## Audit Services Division Office of the City Auditor

Your Organization (optional): \_\_\_\_\_

Person completing questionnaire (optional): \_\_\_\_\_

Audit Report / Topic: \_\_\_\_\_

To help the Audit Services Division in providing better service, please complete the following questionnaire, and return it via the email or interoffice mail noted below.

	<b>Very Good</b>	<b>Good</b>	<b>Fair</b>	<b>Bad</b>	<b>Very Bad</b>
1. The audit team adequately explained the audit approach and scope.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The audit team maintained an adequate level of communication throughout the audit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The conduct of the audit team was professional.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The audit report was clear and concise.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The recommendations in the report were reasonable and useful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The draft report was provided to us, and we had an opportunity to provide input.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Overall, I am satisfied with the audit process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Other comments:

Please return completed questionnaire  
by interoffice mail to: Audit Services Division at 131/310  
or by email to: [rcowan@ci.portland.or.us](mailto:rcowan@ci.portland.or.us)

