



# Booster Club/PTO Audit Packet

Booster Club Name

Date

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EIN (9 digit number)

Club's estimated annual revenue (whole numbers only)

Street Address

City

State

Zip Code

TX

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## NEW OFFICER INFORMATION (upcoming school year)

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President Name

President E-mail address

Vice President Name

Vice President E-mail address

Treasurer Name

Treasurer E-mail address

Secretary Name

Secretary E-mail address

Other Officer Name

Other Officer E-mail address

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Did your club file its Federal Tax Return last year with the IRS? This would be Form 990, 990-EZ or 990-N (e-Postcard).

Please attach proof of filing.

Yes

No

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Did your club file all Sales Tax obligations (either quarterly or annually) with the Texas Comptroller's Office during the prior period? This may not be applicable if you do not have a Sales Tax Permit.

Please attach proof of filing.

Yes

No

Not Applicable

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Summarize audit findings below. If it is a clean audit, type "No Issues"

What are recommendations for the new officers to improve Booster Club operations?

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Audit Committee Member Name

Audit Committee Member Name

Audit Committee Member Name

Date of Audit