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| AUDIT QUOTE | (Company Name)(Contact Number)(Address)(City) |
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| **Auditor Details:** |  |
| **Name:** | **Address:** | **Contact Number:** | **City:** |
| (Name) | (Address) | (Contact Number) | (City) |
|  |
| **Audit Task** | **Time frame** | **Price** |
| Audit Planning | 4 Days | $500.00 |
| Report Preparation, Transaction Confirmations, Internal Controls | 4 Days | $200.00 |
| Risk Assessment, Functionality Testing, Revenue and Disbursement | 3 Days | $150.00 |
| Field work (Deposits, Payroll and unrecorded liabilities checking) | 5 -7 Days | $100.00 |
| Draft Reports (Auditors Feedback, Report Submission) | 3 Days | $100.00 |
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| **Terms and Conditions:*** Payment should be made not later than 15 days.
* 30% should be paid in advance.
 | Sub Total: | $1,050.00 |
| Tax @ 5%: | $52.50 |
| **Total:** | **$1,102.5** |
|  |
| **Prepared By:** | (Name) | **Signature:** | (Signature) |