## 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, <br> Confirmations, Internal Controls | 4 Days | $\$ 200.00$ |
| Risk Assessment, Functionality Testing, <br> Revenue and Disbursement | 3 Days | $\$ 150.00$ |
| Field work (Deposits, Payroll and unrecorded <br> liabilities checking) | $5-7$ Days | $\$ 100.00$ |
| Draft Reports (Auditors Feedback, Report <br> Submission) | 3 Days | $\$ 100.00$ |

## Terms and Conditions:

(2) Payment should be made not later than 15 days.

- (2) 30\% should be paid in advance.


## Prepared By:

