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| AUDIT QUOTE |
|  |
| (Company Name) | (Address) | (Contact Number) | (City) |
|  |
| **Auditor Details:** |  **Prepared By:** |
| (Name) | (Contact Number) | **Name:** | (Name) |
| (Address) | (City) | **Signature:** | (Signature) |
|  |
| **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** |
|  |
| **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** |