## AUDIT QUOTE

(Company Name)
(Contact Number)
(Address)
(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, <br> Internal Controls | 4 Days | $\$ 200.00$ |
| Risk Assessment, Functionality Testing, Revenue <br> 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 | $\$ 100.00$ |

Sub Total: $\$ 1,050.00$
Terms and Conditions:

- (1) Payment should be made not later than 15 days.
- (1) $30 \%$ should be paid in advance.

Tax @ 5\%:
\$52.50
Total
\$1,102.5

