

GETTING READY FOR YOUR AUDIT FOR CHIEF FINANCIAL OFFICERS & TAX COLLECTORS

DECEMBER 9, 2016 - JUMPING BROOK COUNTRY CLUB, NEPTUNE, NJ

- *Approved by DCA for CMFOs & CCFO - 4 CEUs - 2 Financial & Debt Management & 2 Accounting
- *Approve by DCA for CCFO -4 CEUs - 2 Finanacial & Debt Management & 2 County Fiscal Operations
- *Approved by DCA for CTCs - 4 CEUs - 4 General/Secondary Duties
- *Approved for CPAs, RMAs & Pas 4 CPEs in 2 Accounting & 2 Auditing

9:00am - 9:30am *Registration, Full Breakfast Buffet

9:30am - 12:50pm *REVIEW OF WHAT YOU NEED TO DO BEFORE YOUR AUDIT*
Review of General Ledger & Trail Balance
Grant Documentation, Veteran's & Senior Citizen's Proof,
State & County Board Judgements, Delinquents

REVIEW OF WHAT IS REQUIRED AFTER AUDIT IS COMPLETE
 Exit Conference-What You Should Ask & What the RMA Should
 Disucss With You
Review of Management Letter, Contents
Who Must Sign and What Does it Mean?
***Review of Correction Action Plan**

Instructor:
Mr. Fred Tomkins, CPA, RMA, Auditor

Directions on our Web Site <http://ipd2.com>

**In Order to receive proper credit, please mail checks along with this part of the flyer to:
Payment Or Purchase Order Due At Time of Seminar**

Mail Checks to: Institute for Professional Development
 P.O. Box 1468, Clifton, NJ 07015-1468 - Phone (973) 777-4200
 ___I wish to register for Your Audit Responsibilities Seminar 12/9/16.
 \$99 per person \$125.00 Registration at Door
FAX YOUR REGISTRATION (973) 777-0401

C a n c e l l a t i o n P o l i c y - 48 Hours before seminar in writing.
 During Inclement Weather Call Day Before Seminar
 SEMINAR INCLUDES FULL BREAKFAST BUFFET

NAME _____ TITLE _____

ADDRESS _____

ORGANIZATION OR GOVERNMENTAL UNIT	TELEPHONE NUMBER	FAX NUMBER
<u>CLAIMANTS CERTIFICATION & DECLARATION</u>		

I do solemnly declare and certify under the penalty of the law that the within bill is correct in all its particulars, the articles have been furnished or services rendered as stated herein, that no bonus has been given or received by any person or persons within knowledge of this claimant in connection with the above claim and that the amount charged is a reasonable one.

Just send your check with the application form!
 You do not need to send us your Voucher for a separate signature since the presigned certification on the left can be attached to your voucher in lieu of sending it to us for a signature. This form has been determined by DGLS to meet the requirements of the statutes for this type of expenditure.

Michael F. Conti

Michael F. Conti, Program Coordinator
 P.O. Box 1468 , Clifton, NJ 07015-1468 - (973) 777-4200
 VISIT OUR WEB SITE: <http://ipd2.com>