PTA ANNUAL AUDIT/FINANCIAL REVIEW FORM (Page 2 of 3)



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Date of Audit (mm/dd/yyyy): 8/11/22 8 Digit L	ocal PTA Unit ID Ø ø ø ø ø 9 5 7
FULL PTA/PTSA Name: Julia Landon College Prep PTSA	County: Duval
Audit Contact Person: MCHELE O'MAUEY	PTA Position: PRESIDENT 2022-2
Street Address: 1366 GROSVENDR Sa	WARE DR.
City: JACKSONVILLE FL	Zip: 32207
21121 701 202 2011	
Email: MIBS MATTIS DMSN. COM	me Phone:
	24
Auditor/Audit Committee: Please complete Sections A and B. Section A	Audit Period Covered: July 1, 20 27 to June 30, 20 22
 *	
To the Audit Committee: Please check the boxes of the final	ncial records provided to you from the Treasurer:
Copy of last annual audit report (as of June 30 previous year)	If any were conducted, copies of any interim audits that were conducted during the year
All Bank Statements (including PayPal, Stripe, Square, Venmo, CashApp, etc.)	Treasurer's reports from ALL PTA/PTSA meetings including
Checkbook register with running balance (handwritten, excel,	final general membership Annual Meeting
QuickBooks, etc.) Checkbook	Copy of Final Approved budget and all amendments (voted
Cancelled checks	upon and approved by the membership at a general meeting)
Copies of ALL credit card statements (if applicable) N/A	Minutes of all board, executive committee and association
All Deposit Receipts/Records	meetings.
All Cash Verification Forms and Receipts	A current copy of "Annual Financial Review (PTA Audit)" from Florida PTA Kit of Materials, Section 3, Dollars and Sense
All Check Request Forms with receipts/bills attached	Bylaws - Current copy of your bylaws, Stamped Approved
Pre-Approval & Authorization Forms for credit, debit, and EFT	by FPTA
expenses Receipts of bills paid or itemized statements Treasurer's Ledger Book (Excel Spreadsheet, QuickBooks, etc.)	Filed copy of IRS Form 990, 990EZ or 990N "accepted"
rreasurer's Leager Book (Excerspreadsneet, QuickBooks, etc.)	confirmation from previous tax year.
Section B	
Does amount shown on first bank statement (adjusted for outstanding)	ng checks and deposits) correspond to the starting
balance recorded in checkbook register, ledger, treasurer's report an	nd ending balance of audit from previous annual audit?
 Were bank statements reconciled monthly by the treasurer? Were bank statements signed by another person not authorized to signed. 	⊠y □N
- 18 To a sy another person not authorized to si	ign checks or related to a check signer?
 Did all checks written contain two signatures (President, Treasurer or Were all checks properly recorded in checkbook register, ledger and v 	with transurar reports?
6. Were all bank charges and interest recorded in checkbook register, le	edger and treasurer reports?
7. Did the PTA purchase insurance?	ZÝ ON
 Were all check requests and reimbursement authorizations approved 	by the president or designee and contain receipts?
Did the PTA get pre-approval for all payments made via electronic fur	nds transfer (EFT), credit card, and/or debit card?
1.0. Did the PTA Purchase or Receive Gift Cards/Gift Certificates?	⊠ Ý □N
.1. Were Gift Cards/Gift Certificates documented properly? (if applicable.2. Did the PTA use Cash Verification Forms or Cash Count Sheet?	
3. Were all funds received and counted by two persons and verified by t	the transmission
Did funds received match deposits recorded in the checkbook register	
5. Was income spent according to the approved/amended budget?	rieuger and treasurer reports?
6. Did the general membership meeting minutes also include budget app	
Did the general membership meeting minutes also include a motion a	and vote for approval of all budget amendments?
8. $\underline{558}$ # of memberships sold $\underline{558}$ # of membership $\underline{600}$	dues paid to the state - Do they match?
ase contact and return the completed audit to the incoming Treasurer. In	acoming Treasurer cannot write checks until audit is completed.
tgoing Treasurer's Signature: Jami Bueker (treasurer 2021 2023)	1/11/22
time Phone Number: (904) 333-6825	Dâte: jamibueker@gmail.com
oming Treasurer's Name: Jami Bueker (2nd year)	8/11/27
time Phone Number: (904) 333-6825	Email: jamibueker@gmail.com

PTA ANNUAL AUDIT/FINANCIAL REVIEW FORM (Page 3 of 3)



Date o	of Audit: 8/11/22		8 Digit Local PTA I	Unit ID	0 0 0	6957
PTA/P	TSA Name: Julia Landon	College Prep PTSA		Count	y: Duval	1 3 1
	covered by this Audit/Fisc		21to June	e 30, 20, 22		
	numbers covered by this a	udit: Beginning	check # 3,725	Endin	g check # <u>3790</u>	
1.	BOOK BALANCE ON HAN	D (as of last audit on June	30 th of previous	year)	\$ 8,866.57	
2.	RECEIPTS/INCOME receiv					
3.	TOTAL CASH (add Line 1 o	and Line 2 together for To	tal Cash)		\$ 29,287.88	
4.	EXPENSES/DISBURSEMEI					
5.	BOOK BALANCE ON HAN	D as of June 30, 20 22 (s	ubtract Line 4 fror	m Line 3)	\$ 9,874.07	*
6.	TOTAL ACCOUNT/BANK	STATEMENT BALANCE as	of June 30, 20 <u>22</u>		\$ 10,279.80	
7.	OUTSTANDING CHECKS (1	write total amount of outs	standing checks)		\$ 405.73	
	Date of Check 5/26/2022	Check # 3787	Amount of Tran	saction		
	312012022	3/0/	\$ 405.73			
İ						
0	Deleves in Ch. I.	/2 \				
o. ★ n	Balance in Checking Accor	unt (Subtract Line 7 from	Line 6)		\$ 9,874.07	*
ean	econciliation Note: Line 5 an al, your audit report is not re	a Line 8 must be the same t	o balance the PTA I	books to ba	nk. If Line 5 and Line	8 are not
If receipt than \$50 Form 990	s reported on line 2 is greate 1,000, YOU MUST COMPLETE DEZ or 990 (long form).	r than or equal to \$50,000, a THIS SECTION below to calcu	and your average gr Ilate the Gross Inco	ross receipts me and Tota	s for the past (3) year al Expenses to be use	s are greater d on your IRS
9. Tota	l Members Paid for this Fiscal	Year 558 x \$ 3.50) = (Payments made to	EPTA)	s 1,953.00	
10. Subt	ract line 9 from line 2 to calcu	ulate Gross Receipts used fo	r IRS reporting on F	Form 990	\$ 18,468.31	
11. Subt	ract line 9 from line 4 to calcu	ılate Total Expenses used fo	r IRS reporting on I	Form 990	\$ 17,460.81	
	t must be completed before j					our Form 990.
PLEASE (CHECK ONE: We) have audited the books ar We) have audited the books ar We) have audited the books ar	nd find them to be correct.	ms and or/make the	sa suggestion	25	
AUDIT CC	MMENTS REQUIRED: If the age of the graph of	audit committee finds missir	ng funds, inadequat	e records o		
	nave attached our findings/rec		o and recommenda	1 4		
Auditor 1	/Reviewer Signature	Auditor 2 / Reviewer Sig	gnature	Auditok	MCM OCULA /Reviewer Signature	<i>A</i>
MCHE		KATITATE OF HA	/Reviewer	Gao Printed N	MeManic Imp Auditor 3/Reviews	Ser
11a	Mine Mill esident's Signature	6		8/1	122	
or ent Ph	esidelit 2 signature	Current Treasurer's Sign	ature	Date	<i>t</i> .	

FLORIDA PTA COMPLIANCE: (1) A copy of the signed and dated Audit Report must be submitted to Florida PTA annually (2) ALL ORIGINAL SIGNATURES ARE REQUIRED ON PAGE 2 (Florida PTA does NOT accept electronic signatures.) (3) Once the appropriate 990 is filed with the IRS, on or before November 15, you are required to forward an "accepted" copy of the 990N or a complete signed and dated copy of the 990EZ or 990 Long Form to Florida PTA. Include copies of all



JULIA LANDON COLLEGE PREPARATORY PTSA 1819 THACKER AVE JACKSONVILLE FL 32207-3333

Statement Ending 06/30/2022

JULIA LANDON COLLEGE

Page 1 of 4

Account Number: XXXXXXXXXXXXXXXX3001

Managing Your Accounts

Customer Care

(800) 277-2175

Mailing Address

P.O. Box 9602

Winter Haven, FL 33883

Website

SouthStateBank.com

Welcome to Banking Forward.

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community and pro-



Summary of Accounts

Account Type

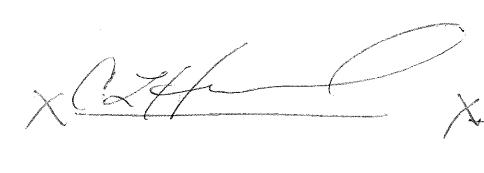
BUSINESS CHECKING I

Account Number

Ending Balance

XXXXXXXXXXXXX3001

\$10,279.80





Statement Ending 06/30/2022

JULIA LANDON COLLEGE

Page 3 of 4

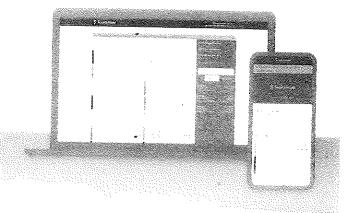
Account Number: XXXXXXXXXXXXXXX3001

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- · Pay Bills Online
- Send Money to Friends
- Set Up Account Alerts
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- Face ID/Fingerprint Sign On
- · Budget & Track Goals



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Internet service provider and/or message data rates may apply. Member FDIC.

BUSINESS CHECKING PXXXXXXXXXXXXXXXXXXXXXX

Account Summary

Date Description Amount 06/01/2022 **Beginning Balance** \$11,200.00 1 Credit(s) This Period \$415.00 6 Debit(s) This Period \$1,335.20 06/30/2022 **Ending Balance** \$10,279.80

Please be aware effective July 11, 2022, SouthState will no longer charge a fee to sweep funds from a linked checking, savings or money market account or line of credit to cover an overdraft. As a result, reference to the Overdraft Sweep Fee (per transfer) of \$12 will be removed from the Business Account Fee Schedule and the Courtesy Overdraft Privilege Business Account Disclosure.

Deposits

Date	Description	A
06/07/2022	DEPOSIT	Amount
	1 item(s) totaling	

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	
3768	06/08/2022	\$25.61			Amount
3785*			3788*	06/13/2022	\$32.24
3/85	06/07/2022	\$58.70 🔪	3789	06/30/2022	\$24.99
3786	06/02/2022	\$873,26	3790	06/06/2022	\$320.40
* Indicates skipped cho	eck number			6 item(s) t	otaling \$1,335.20

Daily Balances

Date A	Mount	Date	Amount	Date	Amazint
00/00/00/00),326.74	06/07/2022	\$10,362.64	06/13/2022	\$10,304.79
),006.34	06/08/2022	\$10,337.03	06/30/2022	\$10,279.80

SouthState #000003768	4/34/2 Ridge Iku Pulja	3768 8272 19 19 19 19 19 19 19 19 19 19 19 19 19	WILL CHARGE COLLEGE PREP. WHITE CHARGE STREET WHITE CHARGE STREET SOUTH STREET STREET #000003785	Notally Con	3785	SouthState #000003786	5/24/26	3785 0125 1 \$ 873. 26 27 10 E
SouthState (1597a) 120 #000003788	5/5/202	5768 5769 570 3V non 15 E	SouthState #000003789	FISA 130/2022 Shell 19/127 De 1-	3783 2000 5 24.97 KRISC \$24.99	SouthState #000003790	S/39/20 COON Galkat-40/100	3750 57.72 BIRTH 15 320, 45 Whenc \$320.40

JULIA LANDON COLLEGE PREP PTBA	12-01-123	2-1-
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JACKERSO LL, FLEREN	į	415 .
Linlana	ši	
M. Marian franchista internanci	Coccomplete -	
र र र प्रकार के किया है से स्वापन करते.	_3 marca -	
SouthState \$	1551 *241 -	
Englishmen (4917)***	:35. \$	7-5-
1 A - 14 TO 17 TO		2.4.

#000000000

06/07 \$415.00



DUVAL COUNTY PUBLIC SCHOOLS OUTSIDE SCHOOL-RELATED ORGANIZATION ANNUAL AUDIT REPORT (SCHOOL YEAR)

2021-2022

School: Julia Landon College Prep School #31			
ORGANIZATION NAME: Julia Landon College Prep PTSA FEDERA	AL I.D. #	t: _	23-7109736
Beginning Book Balance (as of June 30 th of prior year):		\$	8,866.57
Total Receipts:	(+)	\$	20,421.31
Total Disbursements:	(-)	\$	19,413.81
Ending Book Balance (June 30 th):		\$	9,874.07
Outstanding Checks (Attach detailed list):	(+)	\$	405.73
Checking Account Balance (June 30th): per bank statement		\$_	10,279.80
Savings Account Balance (June 30th): per bank statement	\$N/A	4	

This is to certify that the financial records of the <u>Julia Landon College Prep PTSA</u> (organization name) have been examined by the undersigned auditing committee or external auditor and that all disbursements were properly made and with the required authorization. The undersigned also certifies that the above ending bank balance is correct.

NOTE: This includes all cash accounts: Checking, Savings, Money markets, Certificates of Deposit, etc. Copies of the applicable Bank Statements are attached.

Date 8/11/2022 Committe	ee members, please sign and print your name below.
15/ micheleomaeley	1PI MICHELE O'MALLEY
151 Kan B. Hantus	1P1 KATHARINE HARTLAND
151 Lagencemanio	1P1 Gage Mc Manus
/S/	/P/

Complete and give to the bookkeeper for processing

<u>PTSA</u>

Julia Landon College Prep and Leadership Development School

Reimbursement / Check Request Form

Check No.: 3187

Date: 5/2/22

Amount: \$\footnote{3}\f

Check Payable to: Address:	Migan Schutte	
Telephone #:	Jax, FL 32207 314 791 0067	
Committee / Budget A	MS The grade dunce: Descens	Amount 21.94
-in & 12 - 22	101 Maria Ma	34.93 46.62
	1) 7.40 grade dance: Extra Sandwiches 1) 7.40 grade Mavice Table Rental	- 160.48 - 1672.86
	Total Amount Requested:	\$ 405.73
winithie receib	pices <i>must</i> be attached for reimbursement to you or paymen ots from different retailers/vendors can be written on the sa ease number your receipts and list them in order above.	nt to vendor. Time form.
Signature (PTSA A _I	pproved Check Signer):	





Jacksonville St Johns - 904-596-0020 4567 River City Dr Jacksonville, Florida 32246-7411 05/13/2022 12:18 PM

GROCERY		
261000771 LITTLE DEB 4 @ \$2.59 ea	NF	\$10,36
218011576 FD TINY TRY 261000450 LITTLE DEBBI	NF NF	\$8,99 \$2,59

SUBTOTAL \$21.94 NO TAX \$0.00 TOTAL \$21.94 *4040 VISA CHARGE \$21.94 AID: A0000000031010

AUTH CODE: 015073

SOME PROMOTIONS MAY REDUCE THE REFUND VALUE OF ITEMS

REC#2-2138-1974-0171-3175-7 VCD#751-258-445

Help make your Target Run better. Take a 2 minute survey about today's trip

> informtarget.com User ID: 7786 1802 6982 Password: 868 243

> > CUENTENUS EN ESPAÑOL

Please take this survey within 7 days

\$34.93 Free \$34.93 \$34.93 (784) > Subtotal Shipping Total |≤| View Invoice 2:52 PM on May 17, 2022 Picked up at Patriotic Star Sugar Gookies - 11.20z/18ct - Favo... **Picked up** Order Pickup at Regency \$4.99 each Qty 7 >

Visa **4040

\$34.93





Jacksonville East - 904-248-4363 13740 Beach Blvd Jacksonville, Florida 32224-1208 05/18/2022 11:14 AM

GROCERV
218011576 FU TINY TRT NF \$35.96
4 © \$8.99 ea
261000771 LITTLE DEB NF \$7.77
3 © \$2.59 ea
261050894 WHT SHIMMER NF \$1.79

SUBTOTAL \$45.52 NO TAX \$0.00 TOTAL \$45.52 *4040 VISA CHARGE \$45.52 AID: AUGUOU0031010

VISA DEBIT AUTH CODE: 026422

SOME PROMOTIONS MAY REDUCE THE REFUND VALUE OF ITEMS

REC#2-2138-1921-0172-1108-9 VCD#759-254-246

Help make your Target Run better. Take a 2 minute survey about today's trip

> informtarget.com User ID: 7786 1807 9982 Password: 788 911

> > CUENTENOS EN ESPAÑOL

Please take this survey within 7 days





University Square 2875 University Blvd. West Jacksonville, FL 32217 Store Manager: Jason Eskuche 904-419-4807

DEPOSIT		150.48
Order Tota Sales Ta Grand Tota Credit Change	ìΧ	150.48 0.00 150.48 150.48 0.00

Receipt ID: 0105 7231 7722 0088 125

PRESTO!

Trace #: 813036

Reference #: 0200128298 Acct #: XXXXXXXXXXXXX4040

Purchase VISA Amount: \$150.48 Auth #: 073043

Your cashier was Denise S

05/20/2022 14:14 S1176 R181 3895 C0191

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Publix Super Markets, Inc.

Customer Invoice

PAID

PUBLIX AT UNIVERSITY SQUARE 2875 UNIVERSITY BOULEVARD WEST JACKSONVILLE, FL

Phone: (904) 730-5120 Email: Catering 1176@publix.com

Publix

Customer Details

Customer Name: Megan Schutte Business Name: Landon Middle School Phone Number: (314) 791-0067 0 Email: shutte.megan@gmail.com

Event Details

Event ID: 1176-5485
Event Name: School Function
Event Placed By: Denise Schiano
Delivery Date & Time: 05/20/2022 5:00

PM

Delivery Address: 1819 Thacker Ave

Jacksonville, FL 32207

Department:DELI

Quantity	Item Description	Price	Amount	Ordered Online	Paid Online	Special Instructions
2	Boar's Head Classic Slider Trio, Large	69,99	139.98	N	N	
Department:GROCERY						
Quantity	Item Description	Price	Amount	Ordered Online	Paid Online	Special Instructions
1	Grocery - (tax)	10.50	10.50	N	N	

Estimated Balance Due \$150.48

^{*}Prices may vary slightly from this page. Estimated Balance Due does not include tax.



4556 St. Augustine Road Jacksonville, FL 32207 P 904.379.6822 F 904.352.2372 info@allabouteventsjax.com Status: Open Contract #: 43789

Will Call: Fri 5/20/2022 11:00AM Return: Mon 5/23/2022 5:00PM

Operator: Tori Woods

Schutte, Megan

Customer #: 28552 Phone 314-791-0067

. . .

Jacksonville, FL 32207

Job Descr: CUSTOMER PU 5/20/22

Sale	sman: Iori Woods	tori.woods@allabouteventsjax.com				
Qty	Items Rented					
6	36" BISTRO TABLE		Each	Status	Disc%	Price
!	Credit Card Fee - 3%		\$20.92	Out		
			\$4,44	Pulled	Î	\$125.52
				, 0,,00	<u> </u>	\$4.44

Thank you for your Business

Fri 5/20/2022 11:01AM Credit Card Visa 4*******4040 Auth:058974

Total \$152.86	009/4	
l agree to pay the above amount according to the card issuer agreement.		
Intentional damage, water damage, misuse of equipment, or missing items are not covered by d	amage waiver.	
Rental Contract This is a contract. The back of this contract contains important terms and conditions including lessor's disclaimer from all liability for injury or damage and details of customer's obligations. These terms and conditions are a part of this contract - READ THEM! If equipment does not function properly notify lessor within 30 minutes of occurrence or no refund or allowance will be made. All items are due back by 5:00PM on the scheduled return date. You agree to pay the full replacement cost for any and all rented item(s) not returned to All About Events by 5:00PM on the day following the scheduled return date. I HEREBY AUTHORIZE THE LESSOR TO MAKE APPROPRIATE CHARGES TO MY CREDIT/DEBIT CARD. I certify that I have read and agree to all terms of this contract.	Rental: Damage Waiver: Sales:	\$125.52 \$12.24 \$4.44
	Subtotal:	\$142.20
	SALES TAX - DUVAL:	\$10.66
	Total:	\$152.86
Signature:	Paid:	\$152.86
Schutte, Megan	Amount Due:	\$0.00

Payments made on this contract: Rental/Sale Paid

\$152.86