**QUESTIONNAIRE FOR AUDIT SERVICES**

|  |  |
| --- | --- |
| 1. Legal name: | Enter legal name |
| 1. Corporate ID number: | Enter corporate ID number |
| 1. Legal form: | Select or enter legal form |
| 1. Registered address: | Enter registered address |
| 1. Core business activity   (code and name of the activity): | Enter business activity |
| 1. Size   (according to the data from the most recent financial statements): | Select size |
| 1. Does the entity have a parent entity and/or subsidiaries? | Select |
| 1. Is the entity mandatorily subject to preparation of the consolidated financial statements? | Select |
| 1. Related parties   (list all individuals and legal entities, including parent entities, subsidiaries, associates and jointly controlled entities) | Enter related parties |
| 1. Does the entity has branch offices or representative offices?   (if yes, enter all branch/rep offices and their locations) | Enter branch/rep offices and their locations |
| 1. Number of employees | Enter number of employees |
| 1. How is the entity's accounting organized? | Select |
| 1. What accounting software is used by the entity? | Enter |
| 1. Framework for preparation of the financial statements? | Select or enter the applicable framework |
| 1. Does entity have an internal audit department? | Select or enter |
| 1. Have there been status changes or are they expected until the financial year-end? | Select or enter |
|  |  |
| 1. What financial statements are subject to audit? | Select or enter |
| 1. Deadline for delivery of the auditor’s report?   (if different from the legally prescribed deadline) | Select a date |
| 1. Did the entity have its financial statements for the previous year audited? | Select |
| 1. Is there an obligation to deliver the auditor’s report in a foreign language? | Select or enter |
| 1. Does the audit include a reporting package for the Group auditor? | Select |
|  |  |
| 1. Number of fixed asset items? | Enter |
| 1. Number of trade receivable (customer) items? | Enter |
| 1. Number of trade payable (supplier) items? | Enter |
| 1. Number of outgoing invoices? | Enter |
| 1. Number of incoming invoices? | Enter |
| 1. The amount of the total operating assets?   (as of December 31 of the previous year in RSD ‘000) | Enter |
| 1. The amount of the total revenues?   (for the previous year in RSD ‘000) | Enter |
| 1. The amount of profit before taxes?   (for the previous year in RSD ‘000) | Enter |
| 1. Have there been any significant changes to any of the above given data since December 31 of the previous year up to the fill-in date? | Enter |
|  |  |
| 1. Contact person details |  |
| * First and last names | Enter first and last names |
| * Position held within the entity | Enter position |
| * Telephone number | Enter telephone number |
| * Email address | Enter email address |