



OFFICE OF THE STATE AUDITOR
PETITION AUDIT REQUEST

(Form PAR 15-1)

Phone (573) 751-4213

Website: <http://www.auditor.mo.gov>

Return to:

Missouri State Auditor's Office

ATTN: Petitions

P.O. Box 869

Jefferson City, MO 65102

or

Petitions@auditor.mo.gov

General Information

Pursuant to Section 29.230.2, RSMo, the State Auditor's Office may be called on to audit any political subdivision of the state if enough qualified voters of that political subdivision request the auditor to conduct an audit.

Completion of this form is an important step in initiating such an audit and providing information necessary to facilitate the petition audit process; and **is required** to obtain a petition signature form. Incomplete forms will be rejected and not considered submitted.

The name and address of the individual to whom the petition signature form is mailed is a **public record** pursuant to Chapter 610 of the Missouri Revised Statutes.

Please type, print, or write legibly in ink.

Political Subdivision to Audit

Political Subdivision Name

County or Counties in which located

Requestor Contact Information

Last name

First name

Middle name

Mailing Address

City

State

Zip

County

Email

Home Phone

Cell Phone

Work Phone

Note: A home, cell, or work phone number **is required**. Please indicate the best time to contact you and the preferred method of contact.

Please Complete the Requestor Concern List on the Next Page

After the Petition Audit Request form is received by our office, an Audit Manager will call and discuss the listed concerns with you before providing the petition signature form. Please remember that the State Auditor generally limits the audit to the current time period and most recently completed fiscal year. The scope of the audit may be revised as determined by the State Auditor. Although all concerns will be evaluated and considered for inclusion in the audit, the State Auditor's Office determines the scope of the audit, and some concerns may not be audited based on auditor judgment. All concerns received with this request will remain confidential as part of the audit record.

For Agency Use Only

Date Request Received by SAO:

