

OFFICE OF THE STATE AUDITOR
STATE OF MINNESOTA
525 Park Street, Suite 500
Saint Paul, Minnesota 55103

**PETITION FOR AUDIT AND EXAMINATION OF A WATERSHED DISTRICT
PURSUANT TO MINN. STAT. § 6.54 AND § 103D.355**

The entire cost of the audit, requested herein, must be paid for, under the law, by the watershed district mentioned below

We, the undersigned, are resident owners of the _____ Watershed District, County(ies) of _____, Minnesota, do hereby petition the State Auditor, pursuant to law, to examine the books, records, accounts, and affairs of the above said watershed district, covering the period from _____, _____, to _____, _____. We the undersigned petitioners, also request that a copy of the final audit report be sent to:

Name: _____

Address: _____

| | Signature | Print Name | Address |
|-----|------------------|-------------------|----------------|
| 1. | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ |
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| 11. | _____ | _____ | _____ |
| 12. | _____ | _____ | _____ |