

Cloud Storage Backup Audit Report

Date:

Auditor Name:

Department / Organization:

1. Cloud Storage Overview

Cloud Provider(s):

Services Audited:

Total Storage Used:

Data Types Stored:

2. Backup Sources & Schedule

Source System	Type (File/DB/etc.)	Backup Frequency	Last Backup
_____	_____	_____	_____
_____	_____	_____	_____

3. Retention Policy

- Policy Description: _____
- Retention Period: _____
- Archival Process: _____

4. Backup Integrity Check

Date Checked	System/Location	Result	Notes
_____	_____	_____	_____
_____	_____	_____	_____

5. Security and Access Controls

Encryption:

Access Restriction:

Audit Trails:

6. Issues Found

1. _____
2. _____

7. Recommendations

1. _____
2. _____

Auditor Signature:

_____ Date: _____