

# T.U.S.D. ASSOCIATED STUDENT BODY

## MONTHLY REPORTING CHECKLIST

<input type="checkbox"/> KIMBALL HIGH
<input type="checkbox"/> TRACY HIGH
<input type="checkbox"/> WEST HIGH

For every calendar month the following information must be submitted to Financial Services Department – Internal Auditing Section for review. Mark the appropriate spaces to reflect what is included in your packet. Please include adequate information to ensure your account(s) can be properly reviewed. If you have questions, please contact Kathy LeDoux at 830-3200 x1113.

Information for: \_\_\_\_\_ (Month/Year)

Site Reporting: \_\_\_\_\_ Date: \_\_\_\_\_

Submitted By: \_\_\_\_\_  
Print Name Signature

For each Bank Account: (mark below, as appropriate)

Bank Statement copy for the appropriate month (including pages of checks and deposit slips)

Updated detail of checking account from software or checkbook ledger for the appropriate month including bank adjustments.

Site Level Reconciliation, including:

- List of outstanding checks, check dates and amounts
- List of returned checks and amounts
- Other pertinent information (Please list: \_\_\_\_\_)

ASB Meeting Minutes for reporting month, including school name, and:

- a. Motion and Approval of minutes read from prior meeting
- b. Roster and Attendance recorded, or copy of sign in sheet
- c. Vote counts, including nays and abstentions, as appropriate
- d. Approvals of Revenue Potentials/fundraisers, deposits and disbursements

ASB Meeting Schedule, including any revisions

Revenue Potential Forms, including:

- a. New submissions
- b. Updated/Revised copies (post-activity)

Fundraiser Forms, with appropriate approvals

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name Title

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name Title

Please return this form, completed and with all appropriate documentation, to Kathy LeDoux in Financial Services, no later than the 15<sup>th</sup> of each month. Thank you

DATE \_\_\_\_\_