

School Support Organization Financial Review and Inspection

(This form is for internal use and must be completed each month)

Name of School support organization _____

Date _____

The reviewer/review committee members named below have reviewed the financial reports and related financial activity for the time period of _____ through _____, in detail. I/we agree that the financial report, related financial activity and records and documentation are (check one):

- Correct and adequate
- Correct and adequate, with the exceptions listed below
- Incorrect and/or incomplete (detail below)

(Examples of Exceptions would be: no documentation; lost information; missing documentation such as receipts or invoices; profit analysis not performed; deposits not made within three days; calculations not accurate; inventory not performed; bank not reconciled; GoFundMe or other reports not attached; etc.)

Exceptions Noted:

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

To prevent the above exceptions from occurring in the future, the following steps should be taken: (list actions)

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

Reviewer(s) Comments:

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Overview of Financial Activity (prepared by reviewer/committee)	
Balance on Hand (date of last review)	\$ _____
Receipts (from last review to date of current review)	\$ _____
Disbursements (from last review to date of current review)	\$ _____
Balance on Hand (date of review)	\$ _____

I have read and understand this report and the exceptions, if any, noted above.
(This report must be signed by the treasurer and one other officer.)

Printed Name	Officer Title	Signature	Date
	Treasurer		