## **Your School Name**

## Organized ASB Reconciliation Check-Off List

For the Month of:		
Check and attach applicable	e items below:	
☐ Original bank statement	(Checking, Savings, Money Market, Inv	estments)
☐ Reconciliation reports (Faccounts	Report 11K, 11L and 11M) – Reconcile <u>a</u>	ı <u>ll</u> bank
☐ ASB Profit and loss repo	ort (Report 5)*	
☐ Journal and transfer repo	orts (Report 13), with supporting docume	ntation, if
☐ Keep all paperwork at you	our site for audit purposes	
*Enter the start and end date. Selec select each category):	et the following categories (you will need to hold the	CTRL key as you
<ul><li>- ASB General</li><li>- Equity</li><li>- Inventory</li></ul>		
Reconciliation prepared by	Financial Clerk Signature	Date
Reconciliation reviewed by	ASB Advisor Signature	Date
Reconciliation reviewed by	Principal Signature	Date