

PARENT COUNCIL AUDITED ACCOUNTS CHECKLIST

Parent Council Name _____ Year end date _____

Please find enclosed Accounts for the above.

| | | |
|---|------------|--------------------------|
| As Treasurer , I confirm the following: | | (please tick) |
| 1. Copy Bank statement to cover year end date of 31 st July is enclosed | * | <input type="checkbox"/> |
| 2. Payment to Clerk is a nil return | | <input type="checkbox"/> |
| or | | |
| Payment to Clerk form has been completed, original enclosed | * | <input type="checkbox"/> |
| 3. The accounts have been audited and are a true record of the business of the above Parent Council | | |
| Treasurer Signature _____ | | |
| Print Name _____ | Date _____ | |

| | |
|--|------------|
| As Auditor , I confirm I have seen the Parent Council Financial Guidelines, audited and initialled the enclosed accounts. They are a true record of the business of the above Parent Council. | |
| Auditor Signature _____ | |
| Print Name _____ | Date _____ |

| | | |
|---|------------|--------------------------|
| As Chairperson , I confirm the following: | | (please tick) |
| 4. The enclosed accounts have been approved at AGM | | <input type="checkbox"/> |
| 5. Treasurer details are unchanged | | <input type="checkbox"/> |
| or | | |
| Treasurer details require amendment – form completed and original enclosed | * | <input type="checkbox"/> |
| 6. Surplus balance transfer is a nil return | | <input type="checkbox"/> |
| or | | |
| Surplus balance form has been completed, original and surplus balance cheque enclosed | * | <input type="checkbox"/> |
| 7. Bank details are unchanged | | <input type="checkbox"/> |
| or | | |
| Bank details require amendment – form completed and original enclosed | * | <input type="checkbox"/> |
| Chairperson Signature _____ | | |
| Print Name _____ | Date _____ | |

THE TREASURER SHOULD RETAIN A COPY OF THE ACCOUNTS AND FORWARD THE ORIGINAL WITH ALL RELEVANT ACCOMPANYING DOCUMENTS (as marked with an asterix *) TO FINANCE TEAM