

Unit or level – to complete this section:

Name of unit or level	
Period of accounts	
Bank Account Number & Sort Code	
Bank Signatories	

Independent reviewer - to complete

Name of independent reviewer:	
Contact details (email or phone)	

I confirm that I have carried out the following checks on the accounts for the above unit or level:

A bank account exists in the name of the unit or level, and most income is recorded here	
Spending and income are accurately recorded across financial records, including: <ul style="list-style-type: none"> • Bank statements • Paying in books • Cheque Books • Invoices • Receipts 	
Grant money has been used for the right purpose	
Cash Held is minimal	
Money collected for another charity has been passed on appropriately	
I have no concerns with this account	
OR During my review I would like to raise the following matters with the commissioner	

Signed by verifier		Date	
Signed by Commissioner		Date	
Received by County		Date	