Mary Bridge Brigade

Guild Audit/Financial Review Compliance Letter

Guild: _____

Year: _____

We have reviewed the supporting documentation for the Guild's financial summary. All of the documentation was available and the financial statements reflect the activity from this year.

Financials were prepared by _____ , Guild Treasurer.

Financials were reviewed by these members of the Guild Audit/Financial Review Committee.

Printed Names	Signatures
_____	_____
_____	_____
_____	_____

Guild Audit/Financial Review Completion Date _____

NOTE: Complete this *Guild Audit/Financial Review Compliance Letter* or the *Checklist* and submit it to the Mary Bridge Brigade Office, PO Box 5299, MS: 311-1-MBB, Tacoma, WA 98415-0299. Keep a copy for your Guild files.

Mary Bridge Brigade
Guild Audit/Financial Review Checklist

Guild: _____

Date: _____

YES	NO	
☐	☐	Did the Guild Treasurer prepare and submit the annual *Guild Summary of Cash Receipts and Disbursements* for the previous year (January – December) by January 31?
☐	☐	Did the *Guild Summary of Cash Receipts and Disbursements* reconcile to the 12/31/XXXX Guild bank statement balance?
☐	☐	Were Mary Bridge Brigade membership dues collected, recorded and submitted by January 31 with the corrected *Directory & Membership Information* (guild roster)?
☐	☐	Were expenses supported with receipts/invoices?
☐	☐	Was income properly recorded and reported to the Mary Bridge Brigade Office?
☐	☐	Were monies counted by two or more Guild members?
☐	☐	Were funds deposited promptly into Guild accounts with accompanying deposit slips?
☐	☐	Were all checks signed by two authorized signers?
☐	☐	Was the bank statement sent and opened by a Guild officer other than the Guild Treasurer?
☐	☐	Were the bank statements reconciled monthly by the Guild Treasurer and reviewed by another Guild officer?
☐	☐	Are all checks, including voids, accounted for?

Guild Audit/Financial Review Completion Date _____

Guild Audit/Financial Review Committee

Printed Names	Signatures
_____	_____
_____	_____
_____	_____

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