Non-Signer Review of Bank Statement PTA

Bank Statement Date:	
Date statement reviewed:	
I verify that I have checked this bank statement for the following and have noted any concerns below:	
	Checks appearing in non-sequential order
	Checks made out to "cash"
	Checks made payable to non-approved vendors
	Checks written for non-approved expenses
	Missing check numbers
	ATM/Debit/Electronic Transfers
	Checks made out to an individual for an even dollar/cent amount (i.e. \$20.00)
	Transactions on statement verified against financial report(s)
Items of concern:	
Printed Name of Reviewer	
Signatur	e e
Date	