



Independent reviewer's checklist and confirmation form

Unit or level to complete this section

Name of unit or level	1ST OLD KILPATRICK BROWNIES
Name of local commissioner	KATIE YOUNG
Contact details for local commissioner*	southeasterndiv@girlguiding.org.uk

*Email address or phone number

Independent reviewer to complete the following sections

Name of independent reviewer	MAY E MAIN
Contact details for independent reviewer*	MENIKDATIAC@OUTLOOK.COM

☒ I confirm that I am not a member of the unit or level leadership team, a signatory of the unit or level's bank account, or related to anyone in the unit or level

☒ I confirm that I understand the checks required and that I am responsible and financially confident to complete these checks

☒ I confirm that I will hold any personal and/or financial data given to me securely, only share it with people that need to see it for the purpose of this review, and will securely destroy or return the data when it is no longer needed for review purposes

*Email address or phone number

I confirm that I've 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, based on the information I have reviewed, including:
 - Bank statements
 - Paying in books
 - Cheque books
 - Invoices
 - Receipts
- ☒ If any information was missing, this has now been provided
- ☒ Payments have been dual authorised
- ☒ Where online banking is used, the users have confirmed there is no sharing of passwords
- ☒ Grant money has been used for the right purpose
- ☒ Cash held is minimal
- ☒ Money collected for another charity has been passed on appropriately
- ☒ Any errors noted have been adjusted for