

**STUDENT ORGANIZATION DEBIT CARD
RECONCILIATION**

ORG. NAME: _____ DATE OF LAST RECONCILIATION: _____

ACCOUNT No.: 20 _____ - _____ LAST 4 DIGITS OF CARD: _____

INVENTORY CONTROL No.: _____ - _____

REIMBURSEMENTS DEPOSITED TO ORGANIZATION
Unauthorized purchases, IL sales tax, excessive tip, etc.

DATE	DESCRIPTION	DEPOSIT No.	AMOUNT
			\$
	Total Reimbursed to SOFO Account		\$

ACTIVITY SUMMARY

DOCUMENTATION TOTALS

Load Balance: \$ _____

Balance as of _____: - _____

Completed Reconciliations: - _____
(Pending reload request)

Pending Transactions: - _____

Total Expenditures*: \$ _____

Authorized Charges: \$ _____

Service Fees: + _____

Reimbursements Deposited + _____

Reconciliation Subtotal*: \$ _____

***Total Expenditures and Reconciliation Subtotal should match**

DEBIT CARD RELOAD Please reload Do not reload at this time

Reconciliation Subtotal (from Documentation Totals above): \$ _____

Total prior **Completed Reconciliations** pending reload: + _____

Debit Card Reload Amount: \$ _____

By my signature, I attest to the accuracy and the integrity of the attached reconciled debit card transaction history. I understand that all undocumented and/or unauthorized items must be resolved and documented to complete this reconciliation.

TREASURER: _____ DATE: _____

CASH SERVICES ASSISTANT: _____ DATE: _____

CASH SERVICES SUPERVISOR: _____ DATE: _____

STUDENT ORGANIZATION DEBIT CARD
RECONCILIATION GUIDE

RECONCILING

- Comparing the receipts to the card history to ensure funds were used appropriately
- Reconcile every 30 days
- Can reconcile without reloading

RELOADING

- Adding the depleted funds back to the card
- Must include a signed SOFO voucher with reconciliation paperwork
- Must reconcile before reloading

TERMS TO KNOW

- **Inventory Control Number (ICN):** Unique and secure card identification number. Always include ICN on all paperwork. Never use the transactional 16-digit number to identify card.
- **Reimbursements:** If your group funds were used to pay IL State tax, paid tip over 20%, or purchase personal items, you must reimburse your SOFO account. Deposit the total amount in cash or check to the Cashier's Office before or during the reconciliation. Include the pink deposit receipt with your reconciliation paperwork.
- **Load Balance:** Initial balance requested for the card, max amount on the card that does not change
- **Completed Reconciliations:** The total amount of money from any previous reconciliations that have not been reloaded.
- **Pending Transactions:** Any purchases that will not be included in the reconciliation. *Note:* these may only be the most recent purchases.
- **Total Expenditures:** Subtract the current card balance, any completed reconciliations, and any pending transactions from the original load balance to determine how much money the group spent during this reconciliation period.
- **Authorized Charges:** The total of all purchases that follow SOFO guidelines. Do not include any reimbursements or service fees.
- **Service Fees:** After 3 months of inactivity, you will be charged a \$3.00 service fee. You do not need to reimburse this amount.
- **Reconciliation Subtotal:** Add the authorized charges, service fees, and reimbursements deposited to find the total reconciliation amount for this period.

*The amount your group is reconciling (**Reconciliation Subtotal**) should be the same as the amount of money the group spent (**Total Expenditures**).

RECONCILIATION CHECKLIST

- Completed & signed reconciliation form
- All original receipts taped to blank sheet of paper
 - Vendor name, date, location
 - Itemized
 - Proof of purchase, i.e. the last four digits of the card
 - Charge total matches Cashier's Office history
 - Advisor's signature on the receipt
- Pink deposit receipt (if needed)
- Completed voucher (if reloading)