



Cost Center Verification Log

I verified transactions for the following cost centers.

Description of Cost Centers Verified (Complete One):

All active cost centers for Dept ID _____

All active cost centers for Cost Center Manager _____

Other: _____

Accounting Period Verified: Fiscal Year: _____ Month: _____

Name of Verifier: _____ Title: _____

Date Verification was Completed: _____ Initials of Verifier: _____

Are any corrections/adjustments needed to the cost centers verified? (Y/N) _____

For each correction or adjustment needed, note the following below: (1) cost center, (2) account, (3) amount, (4) date of original transaction, and (5) description of correction/adjustment needed.

I reviewed the above cost center verifications.

Name of Reviewer: _____ Title: _____

Date Review was Completed: _____ Initials of Reviewer: _____

Note: Reviews of cost center verifications must be completed no later than 60 days after the close of the accounting period being verified.

Reviewer Comments (Optional):