

Date: [Insert Date]

To: [Insert Managing Partner or Financial Officer Name]

From: [Insert Name of Person Performing Reconciliation]

Subject: Monthly Reconciliation Report for Attorney Trust Account

Account Name: [Insert Exact Account Name]

Account Number: [Insert Last 4 Digits of Account Number]

Reconciliation Period: [Insert Month/Year]

Dear [Insert Name],

This letter serves to formally document the reconciliation of the above-referenced Attorney Trust Account for the period ending [Insert End Date].

I. Financial Summary:

- **Bank Statement Ending Balance:** \$[0.00]
- **Total Outstanding Deposits:** \$[0.00]
- **Total Outstanding Checks/Withdrawals:** \$[0.00]
- **Adjusted Bank Balance:** \$[0.00]

II. Book Balance Comparison:

- **Internal Ledger Balance:** \$[0.00]
- **Total of Individual Client Ledgers:** \$[0.00]
- **Difference/Discrepancy:** \$[0.00]

III. Reconciliation Status:

[State whether the account is balanced or if there are variances. For example: "The adjusted bank balance matches the total of all individual client ledgers. No unexplained variances were found."]

IV. Attachments:

- Bank Statement
- Check Register / Transaction Journal
- Individual Client Ledger Listings
- Outstanding Checklist

Signatures:

Prepared By (Date)

Reviewed/Approved By (Date)