

**Date:** [Insert Date]

**Client Name:** [Insert Client Name]

**Address:** [Insert Client Address]

Dear [Insert Client Contact Name],

This letter confirms the terms of our engagement and the nature of the bookkeeping services [Insert Your Firm Name] will provide for [Insert Client Company Name].

### **1. Scope of Services**

We will perform the following monthly bookkeeping services:

- Recording of all bank and credit card transactions.
- Reconciliation of [Insert Number] bank accounts and [Insert Number] credit cards.
- Preparation of monthly Profit and Loss statements and Balance Sheets.
- [Optional: Accounts Payable/Accounts Receivable management].
- [Optional: Monthly sales tax filings].

### **2. Client Responsibilities**

You are responsible for:

- Providing all bank statements, receipts, and financial documents by the [Insert Day] of each month.
- Ensuring the accuracy of the data provided to us.
- Final approval of all financial reports and tax filings.

### **3. Professional Fees**

Our fee for these services is \$[Insert Amount] per month. This fee is due on the [Insert Day] of each month. Additional services outside this scope will be billed at an hourly rate of \$[Insert Amount].

### **4. Term and Termination**

This agreement is effective as of [Insert Start Date] and will continue on a month-to-month basis. Either party may terminate this agreement with [Insert Number] days' written notice.

### **5. Limitation of Liability**

Our work is based on information you provide. We will not perform an audit or verify the information for accuracy or completeness. Our services cannot be relied upon to disclose errors, fraud, or illegal acts.

Please sign and return a copy of this letter to indicate your acceptance of these terms.

Sincerely,

[Your Name/Firm Name]

**Accepted by:**

\_\_\_\_\_  
[Client Signature]

**Date:** \_\_\_\_\_