

Audit Program Checklist Audit Year 2006

1. General Information

Audit Contact Person _____
 Congregation _____
 Address _____
 e-mail: _____
 Telephone _____

Audit Committee Members:

Vicar _____
 Senior Warden _____
 Junior Warden _____
 Clerk _____
 Treasurer _____
 Assistant Treasurer _____

Records Maintained by _____
 Location of Financial Records _____

Amount on Line D of 2006 Parochial Report _____

2. Documents Required for Review:

| | | |
|---|-----|----|
| Original signed Vestry minutes | Yes | No |
| Minutes of any group authorized to disburse money | Yes | No |
| Annual financial report to parish | Yes | No |
| Treasurer's interim reports Annual Parochial Report | Yes | No |
| Names of those authorized for check signing, fund withdrawal or transfer, and disbursing approval | Yes | No |
| List of securities held | Yes | No |
| Arrangements made for mailing requests for confirmation of bank balance(s), loan balance(s) and investments | Yes | No |