

AUDIT CHECKLIST FOR 2019

For use only by congregations whose 2019 total annual revenues were under \$300,000 Please attach a Balance Sheet and Income Statement as of 12/31/19

To: The Treasurer of the Diocese of Tennessee
Episcopal Diocese of Tennessee
3700 Woodmont Boulevard
Nashville, TN 37215

This is to certify that we have reviewed the general ledger, bank statements, and checkbook(s) for the year 2019 for _____ Church at _____ and submit the following audit checklist.

(Please answer on these sheets and attach additional sheets as necessary.)

_____ All receipts of money were properly deposited in a timely fashion in _____ Bank in the name of _____.

_____ All withdrawals of funds were properly supported by a check with supporting receipts where possible showing the purpose of the withdrawal.

_____ All checks were signed by two parties.
_____ Bank Statements were reconciled monthly.

_____ Journals were maintained in which all deposits and withdrawals were recorded.

_____ Journals, bank statements, deposit slips, canceled checks, and vouchers have been kept for at least the last five (5) years.

_____ Regular written financial reports were made monthly to the Vestry, including a year-end financial statement comparing actual with budgeted amounts, which was published for review by the congregation.

_____ In this audit review, were any discrepancies discovered? If so, please state fully the corrective action taken. This action should be documented and signed by the Wardens of the congregation. (Please attach documentation and signatures to this form.)

_____ Does this congregation hold any trust funds reported in accordance with Canon I.7.c and Tennessee Canon 23, Sec. 7?

_____ Please verify that the treasurer or custodian of any trust funds is bonded and for what amount: _____.

_____ Please state the value of property and liability insurance carried on the congregation and certify that coverage is deemed to be adequate by the Mission Council or Vestry. The Senior Warden should certify this.

Signed: _____
Senior Warden

Audit Review conducted by

Signed,

_____ Phone _____

_____ Phone _____

(to be signed by two members of the internal audit team),

(date)

Please send a Balance Sheet and Income Statement as of 12/31/19 to the Diocesan Office with this checklist.