

Internal Financial Review Worksheet – Part I

(All bank accounts must be reviewed)

Wing: _____

Fiscal Year and Quarter Reviewed: 20 Qtr 1 Qtr 2 Qtr 3 Qtr 4
 (Choose One Quarter) Oct, Nov, Dec Jan, Feb, Mar Apr, May, Jun Jul, Aug, Sep

Date Review Completed: _____

Name and Title: _____

Signature: _____

Date Review Posted to NovelASPECT®: _____

All questions answered with a “no” must be explained on reverse.

- Does the wing have a Director of Finance? Yes No
- Did the Finance Committee meet this quarter?..... Yes On What Date: _____ No
- Were Finance Committee minutes documented in writing? Yes No
- Did all checks over \$500 have two signatures? Yes No
- Did all invoices over \$500 (Unit) or \$1,500 (Wing) have Finance Committee approval? Yes No
- Did you verify that members of the same household did not co-sign checks? Yes No
- Did you verify that there were no pre-signed checks and that blank check stock is secure? Yes No
- Did a random sample of paid checks all have supporting invoices?..... Yes No
- Did all invoices reviewed have necessary approvals? Yes No
- Were all withdrawals from investment accounts approved? Yes No
- Were all applicable reporting deadlines met? Yes No
- Does the wing use credit cards? Yes No
- If the wing uses credit or debit cards, is there a policy in place governing their use? Yes No
- Was all credit card usage documented with itemized receipts? Yes No
- Are all special activity accounts recorded in QuickBooks®?..... Yes No
- Are all voided checks recorded in QuickBooks®, filed, and available for review? Yes No
- Are all check numbers accounted for and sequential? Yes No
- Did you verify that checks were not made payable to cash?..... Yes No
- Did you verify that signers were not listed as payees on checks? Yes No
- Were all checking accounts reconciled each month by the end of the following month? Yes No
- Were all bank reconciliations reviewed and signed by a member of the finance committee?..... Yes No
- Did a sample of WMIRS e108 have fuel receipts attached?..... Yes No

Minimum Sample Size Per Account:
(Maximum is 30)

1-50	6
51-100	10
101-200	15
Over 200	25

Part II must be completed.

CAPF 173 PART I

REVERSE