



Recipient: _____ Contract #: _____

(This checklist only has to be completed at a second monitoring visit if there have been staff changes since the first monitoring visit that affect the approval or processing of financial paperwork or if newly elected officials are involved in the process.)

I. Internal Controls and Separation of Duties

1. Who is principally responsible for maintaining the Recipient’s CDBG financial records and recording transactions?	
Name:	Title:
Name:	Title:
2. Who is responsible for monitoring and reviewing the above individual’s work?	
Name:	Title:
3. Who receives and processes invoices for disbursement?	
Name:	Title:
Name:	Title:
4. Who approves CDBG payments?	
Name:	Title:
Name:	Title:
5. Are the duties of the person responsible for maintaining the CDBG financial records separated from any cash-related functions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
6. Are personnel who perform disbursement functions prohibited from purchasing, receiving, and inventory?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If not , are these functions approved by a third party?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
7. Who signs CDBG checks?	
Name:	Title:
Name:	Title:
Name:	Title:
Name:	Title:
Name:	Title:
8. Is the signing of disbursement checks limited to individuals:	
<ul style="list-style-type: none"> • who are authorized to make disbursements? 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<ul style="list-style-type: none"> • whose duties do not include – 	
<ul style="list-style-type: none"> ▪ posting and recording of accounts receivable? 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<ul style="list-style-type: none"> ▪ approving vouchers for payment? 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Comments:	

Internal Controls and Separation of Duties Monitoring Checklist

2/11/2014

9. Is there documentation that all persons with check signing authority are bonded or insured?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A				
10. Is a signature stamp or an electronic signature used for checks?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A				
<ul style="list-style-type: none"> If yes, who has access to it? <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">Name</td> <td style="width: 50%;">Title</td> </tr> <tr> <td>Name</td> <td>Title</td> </tr> </table>		Name	Title	Name	Title
Name	Title				
Name	Title				
<ul style="list-style-type: none"> What internal controls has the Recipient put in place to keep unauthorized persons from access to checks and electronic signatures? 					

II. Conclusions

Explain any finding(s) or concern(s) and specify corrective actions the Recipient must take to resolve the issue(s). Describe any technical assistance provided.
Empty space for conclusions