



THE MAINE COMMISSION FOR COMMUNITY SERVICE

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FINANCIAL MANAGEMENT SYSTEMS SURVEY FOR POTENTIAL GRANTEES

Legal Applicant: _____ Date of Survey: _____

A. General Information

1. Has your organization received a federal cost-reimbursement award in the last two years?

YES NO If yes, what is your cognizant federal oversight agency.

Agency: _____

Name of Contact: _____ Telephone: _____

2. Has your organization been audited by an independent public accounting firm in the past two years?

YES *If yes, please attach a copy of the report.* NO

3. Was this audit conducted in accordance with OMB Circular A133? YES NO

If "No", what procedures were followed? _____

4. Please indicate the fiscal year of your organization:

Month begins: _____ Month ends: _____

5. What is the usual audit schedule for your organization? _____

6. Does your organization have a cost allocation plan? YES NO (If "Yes", attach a copy.)

7. Does your organization have a negotiated indirect cost rate with a state or federal agency?

YES NO *If "Yes", what is your cognizant agency?* _____

Please attach a copy of your most recent letter from this agency.

8. Has your organization filed for tax-exempt status with the Internal Revenue Service?

YES NO

9. Has the Internal Revenue Service granted final approval for tax-exempt status? YES NO

10. Under which IRS Code did your organization file? _____ 501(c)(3) _____ 501(c)(4)

_____ 501(c)(5) _____ 501(c)(6) _____ Other: _____

11. Please provide a copy of your organization's Articles of Incorporation or Governing document as they relate to your purpose and mission.

Comments: _____

B. Accounting System

1. Which of the following best describes the accounting system:

Manual Automated Combination

2. Is there a chart of accounts? YES NO

3. Is a double entry accounting system used? YES NO

4. What books of account are maintained?

a) General Ledger YES NO b) Project Cost Ledger YES NO

c) Cash Receipts Journal YES NO d) Cash Disbursements Journal YES NO

e) Payroll Journal YES NO f) Income (Sales) Journal YES NO

g) Purchase Journal YES NO h) General Journal YES NO

i) Other (please describe): YES NO

5. Does the accounting system identify the receipt and expenditure of funds separately for each grant and contract? YES NO

6. Does the accounting system provide for recording grant/contract costs according to categories of the approved budget? YES NO

7. Does the accounting system provide for documenting and recording the in-kind value or goods and services contributed to grant or contract projects? YES NO

8. Are time distribution records maintained for each employee to account for his/her total effort (100%)? YES NO

9. Is the accounting system able to disburse stipends that are not based on hours worked but do require withholding income tax and payment of FICA? YES NO

10. Is the organization familiar with the cost principles (OMB Circulars A-21, A-87, or A-122 as appropriate) and procedures for the determination and allowance of costs in connection with federal grants and contracts? YES NO

Comments: _____

C. Funds Management

1. Is a separate bank account maintained for Federal grant/contract funds? YES NO

2. If a separate account is not maintained, can the federal grant/cooperative agreement funds and related expenses be readily identified? YES NO

Comments: _____

D. Internal Controls

1. Are the duties of the bookkeeper/record keeper separated from cash functions (receipt or payment of cash)? YES NO

2. Are checks signed by individuals whose duties exclude recording cash received, approving vouchers for payment and payroll preparation? YES NO

3. Are accounting entries supported by appropriate documentation (e.g., purchase orders, vouchers, etc.)? YES NO

4. Are employees who handle funds required to be bonded against loss by reasons of fraud or dishonesty?

YES NO

Comments: _____

Prepared by: _____

Signature: _____

Title: _____

Date: _____