

Church Internal Control Questionnaire

1. Please print the treasurer's name: _____, pastor's name: _____
2. Are checks ever written by someone other than the treasurer? Please print name(s):

3. Are the loose offerings validated and documented before leaving the church? Yes No
4. Is all the cash received deposited by the 2nd or 3rd business day: Yes No
5. Is there one or more petty cash fund(s)? If yes, what is the amount per occurrence or month?

6. Are financial statements prepared and presented to the church board on a monthly basis? Yes No
7. Is a record of board minutes included? Yes No , if No, please explain why?

8. Are tithe and offering receipts given to donors at least yearly? Yes No
9. Do you have a loan on any church property? Yes No , if yes, please fill out the Loan Section.
10. Do you have money markets funds, CD's, or savings beside the checking account? Yes No , if yes, please fill out the Bank Section.
11. Does the church have any credit cards? Yes No , if yes, please fill out the Credit Card Section.
12. Do you have church paid employees? Yes No , if yes, please fill out the Employee Section.
13. Do you use the Conference Payroll for them? Yes No , if no, explain?

14. If you paid individuals for services rendered \$600 or more, have you sent them a 1099 Form? Yes No , if yes, please fill out the IRS 1099 Form section.
15. What computer program are you using: Jewel Other _____ None
Program password: _____
16. Did you send an USB with the treasury materials Yes No
Or did you send a back up to the server Yes No
17. Please describe the procedure used to safeguard the offerings from the moment they are collected until they are deposited. _____

18. Does the church have any rental agreements with members, day care providers, renters, school, etc.?
 Yes No If yes, please explain:

19. Does the church help students through a student-aid program (Worthy Student)? Yes No
 If yes, is there a written student-aid policy? (Attach copy)

20. Does the church have a benevolent/community service/poor fund policy? Yes No if yes, attach a copy of the policy.

Employee Section

Employee Name	Position	Tax Form Issued	Frequency of payment
		1099 <input type="checkbox"/> W-2 <input type="checkbox"/> None <input type="checkbox"/>	Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly <input type="checkbox"/>
		1099 <input type="checkbox"/> W-2 <input type="checkbox"/> None <input type="checkbox"/>	Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly <input type="checkbox"/>
		1099 <input type="checkbox"/> W-2 <input type="checkbox"/> None <input type="checkbox"/>	Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly <input type="checkbox"/>
		1099 <input type="checkbox"/> W-2 <input type="checkbox"/> None <input type="checkbox"/>	Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly <input type="checkbox"/>
		1099 <input type="checkbox"/> W-2 <input type="checkbox"/> None <input type="checkbox"/>	Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly <input type="checkbox"/>
		1099 <input type="checkbox"/> W-2 <input type="checkbox"/> None <input type="checkbox"/>	Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly <input type="checkbox"/>
		1099 <input type="checkbox"/> W-2 <input type="checkbox"/> None <input type="checkbox"/>	Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly <input type="checkbox"/>
		1099 <input type="checkbox"/> W-2 <input type="checkbox"/> None <input type="checkbox"/>	Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly <input type="checkbox"/>
		1099 <input type="checkbox"/> W-2 <input type="checkbox"/> None <input type="checkbox"/>	Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly <input type="checkbox"/>

IRS 1099 Form Section

Name	Service Rendered	Amount Paid	1099 Form Issued
			Yes <input type="checkbox"/> No <input type="checkbox"/>
			Yes <input type="checkbox"/> No <input type="checkbox"/>
			Yes <input type="checkbox"/> No <input type="checkbox"/>
			Yes <input type="checkbox"/> No <input type="checkbox"/>
			Yes <input type="checkbox"/> No <input type="checkbox"/>

Loan Information Section

Lender: _____

Account #: _____

Address: _____

Original Amount Borrowed: _____

Current Balance for Year Ending December 31, 20__ : _____

Phone #: _____

Monthly payment: _____

Contact Person: _____

Number of payments due: _____

Interest Rate: _____

Bank Information Section

Bank Name: _____

Address: _____

Phone: _____

Contact Person: _____

Type of Bank Account: _____

Account #: _____

Current Balance for year ending December 31, 20__:

Interest rate: _____

Debit Card Link: Yes No

If yes, who has access to debit card?

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Bank Name: _____

Address: _____

Phone: _____

Contact Person: _____

Type of Bank Account: _____

Account #: _____

Current Balance for year ending December 31, 20__:

Interest rate: _____

Debit Card Link: Yes No

If yes, who has access to debit card?

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Bank Name: _____

Address: _____

Phone: _____

Contact Person: _____

Type of Bank Account: _____

Account #: _____

Current Balance for year ending December 31, 20__:

Interest rate: _____

Debit Card Link: Yes No

If yes, who has access to debit card?

Credit Card Information Section

Company Name: _____

Address: _____

Phone: _____

Contact Person: _____

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Total Number of Credit Cards: _____

Type of Credit Card: MC Visa Discover
American Express

Account #: _____

Balance for year-ending December 31, 20__ :

Interest Rate: _____

Minimal payment: _____

Company Name: _____

Address: _____

Phone: _____

Contact Person: _____

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Total Number of Credit Cards: _____

Type of Credit Card: MC Visa Discover
American Express

Account #: _____

Balance for year-ending December 31, 20__ :

Interest Rate: _____

Minimal payment: _____

Company Name: _____

Address: _____

Phone: _____

Contact Person: _____

Total Number of Credit Cards: _____

Type of Credit Card: MC Visa Discover
American Express

Account #: _____

Balance for year-ending December 31, 20__ :

Interest Rate: _____

Minimal payment: _____