NMHU's
Audit Certification and Financial Status Questionnaire

Please complete and return to:
NMHU
Office of Research and Sponsored Projects,
Sininger Hall, Suite 235
Las Vegas, NM
or FAX #505-454-2117

Name of Organization/Company: _____

Audit Certification of Organization's/Company's Most Recently Completed Fiscal Year

A. External independent audits of my organization/company have been completed for Fiscal Year 200_____.
My fiscal year is from MM/DD/YYYY: _____ to MM/DD/YYYY:_____).

A true, complete and correct copy of the audit report is attached and hereby provided to NMHU.

OR

B. My organization/company has **not** been audited by a U.S. Government audit agency or by an independent CPA firm for the most recently completed Fiscal Year from MM/DD/YYYY:_____ to MM/DD/YYYY:_____).

True and correct information concerning my organization's finances is provided in the attached Financial Status Questionnaire.

Signature of Authorized Official:

Signature: _____Date: _____

Name (printed)_____Title _____

Organization/Company Name and EIN _____

Address _____

Phone _____Fax_____Email_____

Reminder!

If you checked "A" to the Audit Certification, above,
please attach and send a complete copy of your organization's audit report.

If you checked "B" to the Audit Certification, above,
please fill out and send the attached Financial Status Questionnaire.

Provider: NMHU's Office of Research and Sponsored Projects
Originated: September, 2007 (Sec03)

NMHU
Financial Status Questionnaire
(4 Pages)

Name of Organization/Company: _____

Authorized Official:_____

Signature of Authorized Official: _____

General Information

YES	NO	1. Does your organization have its financial statements reviewed by an independent public accounting firm? (**Please enclose a copy the most recent financial statements for your organization, audited or unaudited.)**
YES	NO	2. Are duties separated so that no one individual has complete authority over an entire financial transaction?
YES	NO	3. Does your organization have controls to prevent expenditure of funds in excess of approved, budgeted amounts?
YES	NO	4. Other than financial statements, has any aspect of your organization's activities been audited within the last two years by a governmental agency or independent public accountant? Explain. **(Please provide a copy of any recent external audit report.)** _____ _____ _____ _____ _____

Cash Management

YES	NO	5. Are all disbursements properly documented with evidence of receipt of goods or performance of services?
YES	NO	6. Are all bank accounts reconciled monthly?

Payroll

YES	NO	7. Are payroll charges checked against program budgets?
YES	NO	8. What system does your organization use to control paid time, especially time charged to sponsored agreements? _____ _____ _____ _____ _____

Procurement

YES	NO	9. Are there procedures to ensure procurement at competitive prices?
YES	NO	10. Is there an effective system of authorization and approval of:
YES	NO	a) Cpital equipment expenditures?
YES	NO	b) Tavel expenditures?

Property Management

YES	NO	11. Are detailed records of individual capital assets kept and periodically balanced with the general ledger accounts?
YES	NO	12. Are there effective procedures for authorizing and accounting for the disposal of property and equipment?
YES	NO	13. Are detailed property records periodically checked by physical inventory?
		14. Briefly describe the organization's policies concerning capitalization and depreciation.

Cost Transfers

15. How does the organization ensure that all cost transfers are legitimate and appropriate?

Indirect Costs

YES	NO	16. Does the organization have an indirect cost allocation plan or a negotiated indirect cost rate? Explain. **(Please provide a copy of any negotiated indirect cost rate agreement.)**

Indirect Costs (Continued)

YES	NO	17. Does the organization have procedures which provide assurance that consistent treatment is applied in the distribution of charges to all grants, contracts and cooperative agreements? Explain.

Cost Sharing

18. How does the organization determine that it has met cost sharing goals?

_____
_____
_____
_____
_____

Compliance

YES	NO	19. Does your organization have a formal policy of nondiscrimination and a formal system for complying with Federal civil rights requirements?
YES	NO	20. Does your organization have a cash forecasting process which will minimize the time elapsed between the drawing down of funds and the disbursement of those funds?
YES	NO	21. Please provide a list of recent grants, contracts or cooperative agreements your organization has received from NMHU. _____ _____ _____ _____

Attachments

YES	NO	Recent Financial Statements External Review or Audit Report
YES	NO	Financial Statements, Audited or Unaudited
YES	NO	Indirect Cost Rate Agreement
YES	NO	List of Awards from NMHU