

Financial Contract Compliance Screening Tool SUBRECIPIENT CONTRACTS

Contractor: _____

Contract Period: _____ Purchase Order: _____

Date: _____ OSDH Reviewer: _____

Program Name: _____

QUESTION	YES	NO	N/A	INFORMAL ACTION	FORMAL ACTION
1. Does Contractor have a signed copy of their agreement and purchase order with OSDH? Action: View copy.				X	
2. Does Contractor have a copy of the approved budget attached to the agreement? Action: View copy and compare to latest version.				X	
3. Does Contractor have on staff the number and type of employees budgeted per contract? Action: Discuss difference between employees and sub-contractors.					X
4. Does Contractor have a time and effort reporting (or similar) system?					X
5. Does the time and effort reporting system reflect the total time worked by an individual employee?					X
6. Does the time and effort reporting system reflect total time worked on individual programs?					X
7. Are time and effort sheets signed by the employee and their supervisor? Action: Obtain a signed copy and attach to this worksheet.					X
8. Does the Contractor have a policy that requires employees to conform to the current State Travel Reimbursement Act? If no, does the Contractor limit billing to the State Travel Reimbursement Act?				X	

QUESTION	YES	NO	N/A	INFORMAL ACTION	FORMAL ACTION
9. Does the Contractor prepare the OSDH invoices on actual documented expenses incurred and paid? (For example the Contractor should not be invoicing 1/12 th of contract each month unless actual expenditures equal or exceed 1/12th.)				X	
10. Does Contractor have an approved Federally negotiated indirect cost rate agreement? (i.e. salary and fringe of the director, bookkeeper, secretary, rent, utilities, etc.) Action: Review copy and compare to latest version.				X	
11. Does the Contractor have a written cost allocation plan? Action: Review copy and compare to latest version.				X	

COMMENTS: _____

My signature acknowledges that all of the above questions were understood and as an official and authorized representative of the Contractor, I have provided true and correct answers to the best of my knowledge.

Position	Signature	Date
Chief Financial Officer		
Chief Executive Officer		
OSDH Reviewer		

OSDH Reviewer: Please complete this screening tool with the assistance of the Contractor's Chief Executive Officer and/or Chief Financial Officer. Review any "no" responses with the financial officer and refer to the contract for guidance. Document any resolution reached, favorable or unfavorable. If you do not reach favorable resolution, this worksheet should be discussed with your supervisor and the Contract Administrator.