# Contract Financial Assessment

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| --- | --- | --- | --- |
| *To be completed by contract manager* | | *To be completed by provider* | |
| Provider name: | Click to enter text. | Form completed by: | Click to enter text. |
| Contract number: | Click to enter text. | Email address: | Click to enter text. |
| Payment type: | Choose an item. | Organization type: | Choose an item. |

**Instructions:** Please complete this assessment to reflect your organization’s current financial practices. Complete the questions to the best of your ability and return to your contract manager. These questions will be used to assist Hennepin County to understand your organization’s financial support needs.

# Accounting Functions

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| --- | --- | --- | --- |
| **Question** | **Provider Response** | | |
| 1. What accounting system does your organization currently use? | Choose an item. | | Add details here if needed. |
| 1. Are the accounting functions outsourced or performed internally? | Choose an item. | | Add details here if needed. |
| 1. Can your organization produce program specific financial statement[[1]](#footnote-2) reports? | Yes | No | Need more info |
| 1. Can your organization produce agency-wide financial statement reports? | Yes | No | Need more info |
| 1. Can your organization produce an agency-wide budget with cost allocation[[2]](#footnote-3) of expenses shared between programs or funders? | Yes | No | Need more info |
| **Accounting system comments or questions:** Click to enter text. | | | |
| **HC Staff Use Only:** Choose an item.  Click to enter text. | | | |
|  | | | |
| **Chart of Accounts[[3]](#footnote-4) structure**  *Example: Department ID - Fund – Cost Center – Account (XX-XX –XXXX –XXXX)* | | | |
| 1. Does your organization provide more than one program or service? | Yes | No | Add info here if needed. |
| 1. Is Hennepin County the only funder for this program or service? | Yes | No | Add info here if needed. |
| 1. Does your organization have multiple programs with multiple funders? | Yes | No | Add info here if needed. |
| 1. If no to question 7, what name or cost center[[4]](#footnote-5) number is used to track costs for this program? | Click to enter text. | | |
| **Accounts comments or questions:** Click to enter text. | | | |
| **HC Staff Use Only:** Choose an item.  Click to enter text. | | | |

Policy and Procedure

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| **Question** | **Provider Response** | | |
| 1. Does the organization currently have a Financial Policies and Procedures Manual? | Yes | No | Add info here if needed. |
| 1. Does the policy/procedure manual reflect current business practices? | Yes | No | Add info here if needed. |
| 1. When was the policy/procedure manual last reviewed or updated? | Click to enter a date. | |  |
| 1. Which items are included in the Financial Policy and Procedure Manual (check all that are currently written and add a comment in the field below for items that do not apply to your organization):  |  |  | | --- | --- | | Bank Reconciliations | Accounts Payable | | Cash Receipts | Payroll | | Gift Acceptance | Payroll Allocations | | Procurement | Administrative Allocation Schedule | | Petty Cash | Capitalization | | | | |
| **Policy/procedure comments or questions:** Click to enter text. | | | |
| **HC Staff Use Only:** Choose an item.  Click to enter text. | | | |

Payroll Information

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| **Question** | **Provider Response** | | |
| 1. Is the organization able to produce a payroll distribution report? | Yes | No | Need more info |
| **Hourly staff time tracking** | | | |
| 1. Does your organization have staff paid hourly? *(If no, skip to question 17.)* | Yes | No | Add info here if needed. |
| 1. Are timesheets manual or electronic entry? | Choose an item. | | Add info here if needed. |
| ***Manual Timesheets*** *(Skip if electronic timesheet was selected above)* | | | |
| 1. Employee signature required? | Yes | No | Add info here if needed. |
| 1. Supervisor approval signature required? | Yes | No | Add info here if needed. |
| 1. How is time spent on different contracts tracked? | Click to enter text. | | |
| ***Electronic Timesheets*** *(Skip if manual timesheet was selected above)* | | | |
| 1. How is supervisor approval documented? | Choose an item. | | Add info here if needed. |
| 1. How is time spent on different contracts tracked? | Click to enter text. | | |
| **Salaried staff time tracking** | | | |
| 1. Does your organization have staff paid as salaried? *(If no, skip to question 20.)* | Yes | No | Add info here if needed. |
| 1. How do salaried staff track time for a program? | Choose an item. | | Add info here if needed. |
| 1. How do staff track time spent on different contracts? | Choose an item. | | Add info here if needed. |
| 1. Is a time study completed with at least two consecutive pay periods? | Yes | No | Not applicable |
| 1. Are time study reports saved with approval signatures? | Yes | No | Not applicable |
| 1. When was the last time study completed for each staff? | Click to enter a date. | | Not applicable |
| **Payroll comments or questions:** Click to enter text. | | | |
| **HC Staff Use Only:** Choose an item.  Click to enter text. | | | |

# Billing - Invoices and Documentation

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| **Question** | **Provider Response** | | |
| 1. List the name and position of the person(s) who will prepare invoices. | Click to enter text. | | |
| 1. List the name and position of the person(s) who will review and approve invoices prior to submitting for payment *(should be different from preparer listed above).* | Click to enter text. | | |
| 1. Can you submit receipts and other back-up documentation to substantiate invoiced costs? | Yes | No | Need more info |
| 1. Does the program involve the distribution of gift cards, debit cards, bus cards or other alternative incentives to clients? | Yes | No | Need more info |
| 1. Describe the financial process for tracking distribution of incentives listed in question 23. | Click to enter text. | | Not applicable |
| **Invoices comments or questions:** Click to enter text. | | | |
| **HC Staff Use Only:** Choose an item.  Click to enter text. | | | |

# Accounts Payable – Third-party invoice procedures

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| **Question** | **Provider Response** | | |
| 1. Does your organization use corporate credit cards as a method of payment?    1. Who is issued these cards?    2. Who reviews for authorized purchases?    3. Do you have written policies and procedures around use of corporate credit cards? | Yes  Yes | No  No | 1. Click to enter text. 2. Click to enter text. 3. Click to enter text. |
| 1. Is the initial purchase request/ employee expense report reviewed and approved? | Yes | No | Add info here if needed. |
| 1. Are approval signatures/initials required on the invoice? | Yes | No | Add info here if needed. |
| 1. How are individual expenses on third party invoices applied to contracts/programs? | Click to enter text. | | |
| 1. If expenses are allocated to several programs, how is this identified on the invoice? | Click to enter text. | | |
| 1. Who reviews if expenses are properly coded and invoiced per contract budget line-item categories? | Click to enter text. | | |
| **Accounts payable comments or questions:** Click to enter text. | | | |
| **HC Staff Use Only:** Choose an item.  Click to enter text. | | | |

# Agency Allocations

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| **Question** | **Provider Response** | | |
| 1. What method is used to determine how administrative and other indirect costs[[5]](#footnote-6) are split between programs within the organization? | Choose an item. | | Need more info |
| 1. Does your organization have more than one method of splitting expenses; for example, FTE, square footage or another method? If yes, please describe. | Yes | No | Add info here if needed. |
| 1. Do you have a spreadsheet (cost allocation schedule) available to show how costs are split? | Yes | No | Need more info |
| **Allocations comments or questions:** Click to enter text. | | | |
| **HC Staff Use Only:** Choose an item.  Click to enter text. | | | |

1. Financial statements are records that present an organization’s financial performance and can be referred to as a Revenue and Expense report, a Profit and Loss Statement, Income Statement or Statement of Activities. [↑](#footnote-ref-2)
2. Cost allocation is the process of identifying, aggregating, and splitting indirect or overhead costs between an organization’s programs or funders. [↑](#footnote-ref-3)
3. Chart of Accounts (COA) is an index of all the financial accounts in an organization’s general ledger grouped into categories such as assets, liabilities, net assets, revenue, and expenses. The accounts are used for recording and tracking income and expenses. [↑](#footnote-ref-4)
4. Cost center is a fixed name or number assigned to a specific program or department within an organization used in an organization’s accounting structure to track expenses for that program or department. [↑](#footnote-ref-5)
5. Indirect costs are expenses that cannot be directly linked to a specific program or department. Indirect costs may include overhead expenses like rent, utilities and administrative costs such as accounting, human resources, IT, etc. [↑](#footnote-ref-6)