

Parish/School: # Name:

Diocese of Charleston

Quarterly Financial Report Package Checklist

FY:

QTR:

Please date the column of your chosen submittal method to indicate when a document was sent	Date emailed to: Parishfinances-aiken@charlestondiocese.org	Date via US Mail	Date uploaded to Diocesan Google Drive
Items 1 - 10 are required 30 days after the end of the 1st, 2nd & 3rd quarters. 4th quarter items are due on August 15.			
1 Balance Sheet - to include a previous year comparison			
2 Detailed Statement of Revenue & Expenditures to include columns for the quarter; year to date to that quarter; year-to-date budget; prior year; and the comparative variances (differences).			
3 Bank Account Reconciliations - for each month of the quarter - reconciliation reports produced by accounting software, i.e. QuickBooks, PDS, Peachtree.			
4 A copy of Bank Statement for each account for each month of the quarter , including investments, CD's, Money Markets, etc.			
5 Reconciliation of Transit accounts 532701 and 762701 (church only)			
6 Copy of the South Carolina Sales/Use Tax Form ST-3 for each month of the quarter or summary to confirm (church only)			
7 Affiliated Organizations Reports along with a copy of their monthly bank statements and reconciliations.			
8 Columbarium Aging Report (church only)			
9 General Ledger - YTD to end of reporting quarter in Excel format via e-mail, CD or flash drive			
10 Unpaid tuition report (schools only)			
Additional document due April 30:			
11 Internal Control Questionnaire due on 4/30 with 3rd Quarter Reports			
Additional documents due August 15:			
12 Budget for next fiscal year			
13 Finance Council representation letter signed by members confirming the following: * Budget reviewed & approved * Year End financials reviewed and discussed			

This financial report is in agreement with the bank statements and financial records. All bank accounts, checking and savings, in the name or for the benefit of the parish are included.

Quarterly financial report prepared by:

_____ signature _____ date

Reviewed by Pastor/Administrator/Principal

_____ signature _____ date

DOC use only: Log___ Collections___ Statistics___ Assmt___ Receivables___ Template___
