# Pre-Audit Checklist

**Vendor / Payee Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

| Checklist Item | **Complete** | **Details** |
| --- | --- | --- |
| Is the Address Book # correct? |  |  |
| Have sales taxes been deducted from the document amount? |  |  |
| Is the invoice number correct? |  |  |
| Is the invoice date correct? |  |  |
| Is the amount correct? |  |  |
| Does coding include a sub-ledger if the payment was for out-of-state travel? |  |  |
| Will adequate identifying information appear on the attached warrant, so that the Recipient understands the reason(s) for payment? |  |  |
| Is the address book number set up for electronic payment? (If the payment is $25,000 or more, payment must be processed electronically.) |  |  |
| Is adequate documentation sustaining the reason for the expenditure attached? |  |  |
| Does the expenditure appear allowable under State law? |  |  |
| Does the expenditure appear allowable under Federal grant? |  |  |

| **JOURNAL ENTRIES - ONLY** | | |
| --- | --- | --- |
| Checklist Item | **Complete** | **Details** |
| Is a complete explanation of the transaction attached? |  |  |
| Does the transaction appear reasonable and allowable? |  |  |

**PRE-AUDITOR’S AUTHORIZATION:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_