ARMY NAF GOVERNMENT PURCHASE CARD PROGRAM

QUARTERLY REVIEW CHECKLIST FOR

CONVENIENCE CHECKS QUARTERLY REVIEWS

Convenience Check Account

ACCOUNT NAME:			DATE REVIEWED:			
ACCOUNT NO:			BILLING OFFICIAL			
				Υ	N	N/A
1	Is the checking account maintained under a separate "cardless" account?					
2	Have any checks been written for more than \$3,000?					
3	Are the check administrative costs accounted for in the check writer's purchase log?					
4	Are internal controls established to avoid duplicate payments for any checks, which are mailed?					
5	Does check writer capture all necessary 1099 data for IRS reporting?					
6	Are checks stored in locked containers when not in use?					
7	Have any checks been written by someone other than the checking account holder?					
8	Have checks been written for items to be delivered beyond 15 days?					
9	Were checks written for any Prohibited Purchases?					
10	If Stop Payment actions were processed against any check, was the charge deducted from the funds documented?					
11	Does check writer account for checks written, but not processed by the Bank when reconciling his/her accounts to assure adequate funds are available?					
12	Does the billing official conduct quarterly surveillance reviews?					
13	Does the billing official maintain original supporting documentation for closed cardholder/check writer accounts?					
Che	eckholder's Printed Name:					
	Checkholder's Signature:		Date:			
	Account Number:					
Signature of Reviewer – APC: _			Date:			
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