

Self Assessment of Internal Control

Matching, Level of Effort, Earmarking

Agency _____

Fiscal Year Ending _____

| <u>YES</u> | <u>N/A</u> | <u>NO</u> | | |
|------------|------------|-----------|----|---|
| | | | | A. Control Activities / Information and Communication |
| | | | 1. | Is appropriate action taken when matching, level of effort or earmarking requirements are not being met as scheduled? |
| | | | 2. | Are matching or level of effort requirements budgeted for the federal program? |
| | | | 3. | Is a system in place to ensure that transactions are properly recorded and recorded only once for correct matching? |
| | | | 4. | Are "in-kind" contributions and volunteer services properly documented? |
| | | | | B. Monitoring |
| | | | 5. | Do designated officials review the sources of amounts budgeted to meet matching or level of effort requirements to determine if they are allowable? |
| | | | 6. | Do designated officials review reports periodically to determine that matching or level of effort requirements are being met as scheduled? |