

SUSPENSE ACCOUNT - DEPOSITS PENDING DISTRIBUTION (GLA 547)
VERIFICATION

Agency Name: _____ Agency Code: _____

PLEASE COMPLETE PARTS A AND B OF THIS FORM AND RETURN TO THE DEPARTMENT OF ACCOUNTS BY JULY 15, 2005.

PART A: CONFIRMATION

To the Comptroller:

Based on our review and adjustment of agency records and CARS reports, the agency balances of GLA 547, Suspense Account - Deposits Pending Distribution, have been adjusted, insofar as possible, to properly distribute pending items. I certify that the agency balances of GLA 547 will agree with the anticipated CARS Final Close balance as of June 30, 2005, by fund/fund detail, as follows:

<u>Fund/Fund Detail</u>	<u>Amount</u>
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total, all funds \$ _____

By: Fiscal Officer

Signature: _____

Typed Name: _____

Title: _____

Date: _____

If any questions, please contact: _____
(Name)

(Phone Number)

UNIDENTIFIED DISBURSEMENTS (GLA 562)
VERIFICATION

Agency Name: _____ Agency Code: _____

PLEASE COMPLETE PARTS A AND B OF THIS FORM AND RETURN TO THE DEPARTMENT OF ACCOUNTS BY JULY 15, 2005.

PART A: CONFIRMATION

To the Comptroller:

Based on our review and adjustment of agency records and CARS reports, the agency balances of GLA 562, Unidentified Disbursements, have been adjusted, insofar as possible, to properly distribute pending items. I certify that the agency balances of GLA 562 will agree with the anticipated CARS Final Close balance as of June 30, 2005, by fund/fund detail, as follows:

<u>Fund/Fund Detail</u>	<u>Amount</u>
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total, all funds	\$ _____

By: Fiscal Officer

Signature: _____

Typed Name: _____

Title: _____

Date: _____

If any questions, please contact: _____

(Name)

(Phone Number)

PAYROLL STOP PAYMENT CLEARING ACCOUNT (GLA 563)
VERIFICATION

Agency Name: _____ Agency Code: _____

PLEASE COMPLETE PARTS A AND B OF THIS FORM AND RETURN TO THE DEPARTMENT OF ACCOUNTS BY JULY 15, 2005.

PART A: CONFIRMATION

To the Comptroller:

Based on our review and adjustment of agency records and CARS reports, the agency balances of GLA 563, Payroll Stop Payment Clearing Account, have been adjusted, insofar as possible, to properly distribute pending items. I certify that the agency balances of GLA 563 will agree with the anticipated CARS Final Close balance as of June 30, 2005, by fund/fund detail, as follows:

<u>Fund/Fund Detail</u>	<u>Amount</u>
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total, all funds	\$ _____

By: Fiscal Officer

Signature: _____

Typed Name: _____

Title: _____

Date: _____

If any questions, please contact: _____
(Name)

(Phone Number)

GENERAL WARRANT STOP PAYMENT CLEARING ACCOUNT (GLA 564)
VERIFICATION

Agency Name: _____ Agency Code: _____

PLEASE COMPLETE PARTS A AND B OF THIS FORM AND RETURN TO THE DEPARTMENT OF ACCOUNTS BY JULY 15, 2005.

PART A: CONFIRMATION

To the Comptroller:

Based on our review and adjustment of agency records and CARS reports, the agency balances of GLA 564, General Warrant Stop Payment Clearing Account, have been adjusted, insofar as possible, to properly distribute pending items. I certify that the agency balances of GLA 564 will agree with the anticipated CARS Final Close balance as of June 30, 2005, by fund/fund detail, as follows:

<u>Fund/Fund Detail</u>	<u>Amount</u>
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total, all funds	\$ _____

By: Fiscal Officer

Signature: _____

Typed Name: _____

Title: _____

Date: _____

If any questions, please contact: _____

(Name)

(Phone Number)

SUSPENSE ACCOUNT - BANK RECONCILIATION (GLA 565)
VERIFICATION

Agency Name: _____ Agency Code: _____

PLEASE COMPLETE PARTS A AND B OF THIS FORM AND RETURN TO THE DEPARTMENT OF ACCOUNTS BY JULY 15, 2005.

PART A: CONFIRMATION

To the Comptroller:

Based on our review and adjustment of agency records and CARS reports, the agency balances of GLA 565, Suspense Account - Bank Reconciliation, have been adjusted, insofar as possible, to properly distribute pending items. I certify that the agency balances of GLA 565 will agree with the anticipated CARS Final Close balance as of June 30, 2005, by fund/fund detail, as follows:

<u>Fund/Fund Detail</u>	<u>Amount</u>
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total, all funds \$ _____

By: Fiscal Officer

Signature: _____

Typed Name: _____

Title: _____

Date: _____

If any questions, please contact: _____
(Name)

(Phone Number)

DEFERRED REVENUE (GLA 719)
VERIFICATION

Agency Name: _____ Agency Code: _____

PLEASE COMPLETE PARTS A AND B OF THIS FORM AND RETURN TO THE DEPARTMENT OF ACCOUNTS BY JULY 15, 2005.

EXCEPTION FOR ATTACHMENT I: Higher education institutions record as deferred revenue cash receipts from student tuition and fees received in the current fiscal year. This is an appropriate use for deferred revenue and the detail of such balances does not have to be individually listed on the Part B (Reconciliation) "Deferred Revenue (GLA 719) Verification Form". Only the balance of this activity needs to be listed and identified. Other activity recorded in GLA 719 must be listed separately per the instructions of this subsection.

PART A: CONFIRMATION

To the Comptroller:

Based on our review and adjustment of agency records and CARS reports, the agency balances of GLA 719, Deferred Revenue, have been adjusted, insofar as possible, to properly distribute pending items. I certify that the agency balances of GLA 719 will agree with the anticipated CARS Final Close balance as of June 30, 2005, by fund/fund detail, as follows:

<u>Fund/Fund Detail</u>	<u>Amount</u>
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
Total, all funds	\$ _____

By: Fiscal Officer

Signature: _____

Typed Name: _____

Title: _____

Date: _____

If any questions, please contact: _____
(Name)

(Phone Number)

PETTY CASH (GLA 103)
VERIFICATION

Agency Name: _____ Agency Code: _____

PLEASE COMPLETE PARTS A AND B OF THIS FORM, ATTACH TO THE JULY 2005 EXCEPTION REGISTER AND RETURN TO THE DEPARTMENT OF ACCOUNTS BY AUGUST 31, 2005.

PART A: CONFIRMATION

To the Comptroller:

Based on the reconciliation on Part B of this form, I certify that the petty cash balance per our agency records is in agreement with GLA 103, CARS ACTR0402, final close report, for the fiscal year ended June 30, 2005. These balances are hereby certified by fund/fund detail as follows:

<u>Fund/Fund Detail</u>	<u>Amount</u>
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total, all funds	\$ _____

By: Fiscal Officer

Signature: _____

Typed Name: _____

Title: _____

Date: _____

If any questions, please contact: _____
(Name)

(Phone Number)

PETTY CASH (GLA 103)
VERIFICATION

PART B: RECONCILIATION

Balance per CARS ACTR0402 FINAL CLOSE, for the year ended
June 30, 2005 (Total of all fund/fund details) \$ _____

Balance per Agency's Records:

CASH ON HAND/IN BANK (book balance) \$ _____

CHANGE FUND(S) (attach schedule) (a) _____

EMPLOYEE ADVANCES (attach schedule) (b) _____

UNREIMBURSED EXPENSES (attach schedule) (c) _____

OTHER RECONCILING ITEMS (attach schedule) (c) _____

TOTAL PER AGENCY RECORDS
(This amount must agree with the total
of all GLA 103 balances per
CARS ACTR0402, FINAL CLOSE) \$ _____

NOTES:

(a) List location and amount of each change fund.

(b) Attach a schedule, by type of advance (permanent or temporary), giving the following information. (Do not include employee advances included in GLA 105 on this schedule.):

<u>Type of Advance</u>	<u>Name of Employee</u>	<u>Date of Advance</u>	<u>Amount</u>
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(c) Attach a schedule, by item, giving the following information. Items to include are buyback of NSF checks, June bank charges/interest, postage deposits, garnishments, etc.:

<u>Purpose of Expense</u>	<u>Date of Expense</u>	<u>Amount</u>
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TRAVEL ADVANCE (GLA 105)
VERIFICATION

Agency Name: _____ Agency Code: _____

PLEASE COMPLETE PARTS A AND B OF THIS FORM, ATTACH TO THE JULY 2005 EXCEPTION REGISTER AND RETURN TO THE DEPARTMENT OF ACCOUNTS BY AUGUST 31, 2005.

PART A: CONFIRMATION

To the Comptroller:

Based on the reconciliation on the reverse side of this form, I certify that the travel advance balance per our agency records is in agreement with GLA 105, CARS ACTR0402, final close report, for the fiscal year ended June 30, 2005. These balances are hereby certified by fund/fund detail as follows:

<u>Fund/Fund Detail</u>	<u>Amount</u>
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total, all funds	\$ _____

By: Fiscal Officer

Signature: _____

Typed Name: _____

Title: _____

Date: _____

If any questions, please contact: _____
(Name)

(Phone Number)

TRAVEL ADVANCE (GLA 105)
VERIFICATION

PART B: RECONCILIATION

Balance per CARS ACTR0402 FINAL CLOSE, for the year ended
June 30, 2005 (Total of all fund/fund details) \$ _____

Balance per Agency's Records:

ADVANCES TO EMPLOYEES:

Permanent (a) \$ _____

Temporary (a) _____

Other (a) _____

TOTAL ADVANCES TO EMPLOYEES \$ _____

OTHER RECONCILING ITEMS (b) _____

TOTAL PER AGENCY RECORDS (This amount must
agree with the total of all GLA 105 balances
per CARS ACTR0402, FINAL CLOSE) \$ _____

NOTES:

(a) Attach a schedule, BY TYPE OF ADVANCE TO EMPLOYEES, giving the following
information:

<u>Document Number</u>	<u>Name of Employee</u>	<u>Date of Advance</u>	<u>Amount</u>
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(b) Attach a schedule, giving the following information:

<u>Description of Item</u>	<u>Date of Occurrence</u>	<u>Amount</u>
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INDIRECT COST RECOVERY
(REVENUE SOURCE CODES 09070 & 09071)
VERIFICATION

Agency Name: _____ Agency Code: _____

PLEASE COMPLETE PARTS A AND B OF THIS FORM AND RETURN TO THE DEPARTMENT OF ACCOUNTS BY JULY 15, 2005.

ATTACHMENT L IS NOT APPLICABLE TO INSTITUTIONS OF HIGHER EDUCATION.

PART A: CONFIRMATION

To the Comptroller:

Based on the reconciliation in Part B of this form, I certify that the total of the indirect cost recovery revenue in both the general fund 0100 and special fund 0280 (revenue source codes 09070 and 09071, respectively) is equal to the indirect cost recovery revenue recorded in the federal fund 1000. These balances are hereby certified by fund/fund detail as follows:

Revenue Source Code 09070:

<u>Fund/Fund Detail</u>	<u>Amount</u>
_____	\$ _____
_____	_____
_____	_____
_____	_____

Revenue Source Code 09071:

<u>Fund/Fund Detail</u>	<u>Amount</u>
_____	\$ _____
_____	_____
_____	_____
_____	_____

By: Fiscal Officer

Signature: _____

Typed Name: _____

Title: _____

Date: _____

If any questions, please contact: _____
(Name)

(Phone Number)

INDIRECT COST RECOVERY
(REVENUE SOURCE CODES 09070 & 09071)
VERIFICATION

PART B: RECONCILIATION

I. REVENUE SOURCE CODE 09070, AGENCY INDIRECT COST RECOVERY

Balances per CARS ACTR1671 PRELIMINARY CLOSE, for the year ended June 30, 2005

Federal Fund 1000	+ _____
Subtract Special Fund 0280	- _____
Difference	= _____

Reconciling items:

Prior year draw down (Recorded in 1000 Fund in FY 2004 & transferred to 0280 Fund in FY 2005)	+ _____
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DIFFERENCE: _____

DIFFERENCE SHOULD BE 0. IF NOT, LIST BELOW AND PREPARE ATV'S TO ADJUST BALANCES BASED ON CAPP MANUAL TOPIC 20705.

Other reconciling items:

ITEM	ATV BID	
1. Current year draw downs recorded in 1000 Fund, but not transferred to 0280 Fund	_____	_____
2. Posting errors _____	_____	_____
3. Other _____	_____	_____

DIFFERENCE ABOVE, LESS OTHER RECONCILING ITEMS, MUST BE 0: = \$ _____ -0- _____

Anticipated Balances per CARS ACTR1671 FINAL CLOSE, for the year ended June 30, 2005
(after making above ATV's)

Federal Fund 1000	+ _____
Subtract Special Fund 0280	- _____
Difference	= _____

Reconciling items:

Prior year draw down (Recorded in 1000 Fund in FY 2004 & transferred to 0280 Fund in FY 2005)	+ _____
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DIFFERENCE: = \$ _____ -0- _____

INDIRECT COST RECOVERY
(REVENUE SOURCE CODES 09070 & 09071)
VERIFICATION

PART B: RECONCILIATION

II. REVENUE SOURCE CODE 09071, STATEWIDE INDIRECT COST RECOVERY

Balances per CARS ACTR1671 PRELIMINARY CLOSE, for the year ended June 30, 2005

Federal Fund 1000		+ _____
Subtract:		
Special Fund 0280 (if appropriated)	+ _____	
General fund 0100 (not appropriated)	+ _____	
Subtotal		- _____
Difference		= _____

Reconciling items:

Prior year draw down (Recorded in 1000 Fund in FY 2004 & transferred to 0280 Fund in FY 2005)	+ _____
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DIFFERENCE: = _____

DIFFERENCE SHOULD BE 0. IF NOT, LIST BELOW AND PREPARE ATV'S TO ADJUST BALANCES BASED ON CAPP MANUAL TOPIC 20705.

Other reconciling items:

ITEM	ATV BID	
1. Current year draw downs recorded in 1000 Fund, but not transferred to 0280 Fund	_____	_____
2. Posting errors _____	_____	_____
3. Other _____	_____	_____

DIFFERENCE ABOVE, LESS OTHER RECONCILING ITEMS, MUST BE 0: = \$ _____ -0- _____

Anticipated Balances per CARS ACTR1671 FINAL CLOSE, for the year ended June 30, 2005
(after making above ATV's)

Federal Fund 1000		+ _____
Subtract:		
Special Fund 0280 (if appropriated)	+ _____	
General Fund 0100 (not appropriated)	+ _____	
Subtotal		- _____
Difference		= _____

Reconciling items:

Prior year draw down (Recorded in 1000 Fund in FY 2004 & transferred to 0280 Fund in FY 2005)	+ _____
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DIFFERENCE: = \$ _____ -0- _____