Non Profit Organization Pre-Application Questionnaire and Eligibility Self Screening

The California Ocean Protection Council (OPC) requires that all nonprofit organizations complete a preaward questionnaire every two years. The purpose of this questionnaire is to help ensure that the non-profit organizations have adequate fiscal controls to receive and manage state grant funds. The OPC seeks to identify potential issues prior to awarding a grant to ensure our grantees have procedures in place at the start of a grant project.

CONTACT INFO									
Organization									
Contact Person			Email						
Phone			Fax						
GENERAL INFORMATION									
1.	Please attach a copy of your most recent financial reports with your response to this questionnaire.								
2.	Have you had a financial audit within the last three years by an independent auditor? Yes \(\square \) No \(\square \) If yes, please provide a copy of the audit report.								
3.	Does your organization have appropriate segregation of duties to prevent one individual from processing an entire financial transaction? Yes No					No 🗌			
4.	Does your organization have controls to prevent expenditure of funds in excess of what is approved in your project budget? Yes No								
5.	Does your organiza	ation have a conflict of interest policy?			Yes 🗌	No 🗌			
6.	How much unrestricted money does your organization raise annually?								
7.	. Is there a Finance Committee of the board of directors, or does the Board make all financial decisions?								
8.	What are the Treasurer's duties?								
CASH MANAGEMENT									
9.	Are grant funds acc	counted for through segregated	d accounts?		Yes 🗌	No 🗌			
10.	Are all disbursement or performance of	nts properly documented with service?	evidence of rec	eipt of goods	Yes 🗌	No 🗌			
PAYROLL									
11.		ation have a time reporting syst or and overhead charges billed	•	to determine and	Yes 🗌	No 🗌			

 Sigi	nature Date	_	
Nar	me of person completing questionnaire Title		
	ertify that the above information accurately represent the organization resentative.	on of which I am a	
21.	. Does your organization have a system in place to ensure it does not u contractors who may be suspended or debarred from receiving feder contracts?	al or state	∣ No □
	Does your organization have a formal system for complying with the of prevailing wages?	Yes _	No □
COI	MPLIANCE		
19.	. Do your financial records identify the receipt and expenditure of function for each grant or contract?	ds separately Yes □	No □
18.	Does the organization have a means to determine and document that it has met cost-sharing goals for each project?		No □
COS	ST SHARING		
17.	. Is this used consistently for all grants and contracts?	Yes 🗌	No 🗌
16.	. Does the organization have an established methodology for calculating costs or overhead?	ng indirect Yes □	No □
IND	DIRECT COSTS		
15.	Are there effective procedures for authorizing and accounting for the property and equipment?	e disposal of Yes 🗌	∣ No □
14.	. Are detailed records of individual capital assets kept and periodically with the general ledger accounts?	balanced Yes 🗀	No □
(Co	omplete this section, if State grants will be used to purchase physical as	sets.)	
PRO	OPERTY MANAGEMENT		
13.	. Is there an effective system of identifying expenditures for time, travenuments of supplies to determine relevancy to individual grant proje		No □
12.	. Have you developed procedures to ensure fair and competitive contr	acting? Yes	No 🗌