



The Washington Center for Nursing
FINANCE POLICIES AND PROCEDURES

Revision 10 – October 2017

FINANCIAL POLICIES & PROCEDURES

INVESTMENTS:

Investment policies to be developed by the Board of Directors in consultation with its CPA/Financial advisors. WCN will retain sufficient funds to fund all accrued PTO.

BANK ACCOUNTS:

All WCN funds will be held in FDIC accounts, up to the allowable FDIC limits.

BANK RECONCILIATION:

The Executive Director will open all statements from the bank and will confirm that all paid checks were for approved purchases. The E.D. will initial and date the statement. The Executive Director will forward the statement to the Finance and Operations Associate (FOA) who will prepare documents for the Bookkeeper. The Bookkeeper will record transactions in QuickBooks and will post any adjustments immediately. The Bookkeeper will initial and date the reconciliation on the bank statement and return to the E.D. The statements are to be filed in the statements calendar year file folder. All of this must be done by the fifteenth day of each month.

CASH RECEIPT:

The Finance and Operations Associate (FOA) or designee opens all mail, except bank statements as mentioned above. Upon receipt of any checks the FOA endorses immediately with the account stamp and prepares a deposit form. A deposit form is also completed for any cash received. All cash, checks and prepared deposit forms are placed in the "funds to be deposited" file in the locked file drawer until deposited or placed in that day's outgoing mail. All funds are deposited within 1-3 business days. The FOA ensures that the Bookkeeper has copies or originals of all deposit documentation. The Bookkeeper manages recording all transactions.

Contribution of funds:

Follow the procedure above for receiving funds. The donor spread sheet (see appendix B) is updated as funds arrive. The "thank you" letter (see appendix C) is sent within thirty days.

CASH DISBURSEMENT:

From Checking:

The Bookkeeper pays all the bills by the end of the month, or within the time frame specified by the vendor or agreed upon in a contract. All bills are confirmed for accuracy by the FOA. All bills are approved for payment by the Executive Director. Expenditures are allocated to the General Ledger by the FOA using the established Chart of Accounts and assigned to the appropriate category(ies) within Program Delivery or Administration. The FOA prepares a Cost Allocation form for the Bookkeeper to record expenses in the specific accounts. The Bookkeeper prepares all checks for approved bills and enters the transactions into QuickBooks; checks reflect the invoice number. All prepared checks (with invoice) are given to the E.D. to approve and sign. The FOA manages the mailing of the checks and filing of the paid invoices. The paid invoice is filed with the Cost Allocation form and the check stub in designated locked file cabinet and folders.

The President, Vice-President, Treasurer/Secretary and the E.D. are signers on this account and have access to the account. These individuals have access to the password allowing access to the account information.

Checks \$5,000.00 or less require only one signature of any of the four positions identified above.

Checks over \$5,000.00 and less than \$10,000.00 require the signature of the E.D. and one member of the Executive Committee of the Board of Directors.

Checks over \$10,000.00 require the review and approval of the Executive Committee of the Board of Directors.

Approvals may be in person or via electronic mail.

Credit Card:

The E.D. maintains custody of the WCN credit card for use solely for WCN business purposes. Officers shall have access to the credit card account, for use solely for WCN business purposes. The E.D. is authorized to charge business expenses per the authorization listed above.

The FOA may charge business expenses solely for WCN business purposes, including supplies, travel arrangements, meeting events and other operations necessities with the approval from the E.D.

Any WCN credit card shall be kept in a safe location by the user, and all policies regarding reporting of loss or theft will be followed per the issuer. Should loss or

theft occur, the holder will also notify his/her supervisor via email, as soon as the loss/theft is identified.

Debit Card:

WCN does not utilize a debit card.

PETTY CASH:

All WCN Employees may request petty cash for authorized WCN expenses that are less than \$100.00. Only the Executive Director (E.D) and the Finance and Operations (FOA) may disperse funds from petty cash. All invoices and receipts are kept in the envelope with the cash. The FOA will reconcile the form (see appendix A) and the invoices at the end of each month, to be approved by the Executive Director. No more than \$100.00 will be held in the petty cash at any given time, to be replenished on a monthly basis, or as need dictates. All original receipts and the monthly record will be retained in the WCN locked file with other confidential records.

Purchases:

A purchase request form must be submitted to the Executive Director for items over \$250.00 in cost for an individual item or an aggregate purchase (see appendix D). Forms are to be filed and kept retained with other financial records.

Fixed Assets:

The E.D. will maintain a current record of all assets owned by WCN. Any fixed asset with a value of more than \$5000.00 and with a life of more than one (1) year will be capitalized.

PAYROLL:

1. Each hourly and exempt employee records his/her worked hours on the WCN Biweekly timesheet and submits to FOA by a designated due date. The FOA will submit all sheets to the E.D. for approval and signature.
2. Hours are recorded on the WCN-ADP Time Worksheet which is retained in the WCN office in a locked file.
3. The E.D.'s original Biweekly timesheet is signed and sent to the President of the Board for authorization and retention. A copy of the document is retained with other employee timesheets in the WCN office in a locked file.
4. See document "Administrative Policies" for directions on decisions regarding payroll.

5. Supervisor or identified designee inputs the payroll in the ADP online payroll system at www.runpayroll.adp.com at least 2 days prior to the check date (15th and last day of month).

Client code and IID number in confidential payroll file

6. Distribution of hours by “Program Activities”, “Administrative Activities” or “Fundraising Activities” will be identified and monitored, per employee, according to each Position Description and work accountabilities. This information will be retained and made available to individuals, organizations, and regulatory bodies authorized to review such information.
7. The original ADP worksheet is retained in the WCN office “Payroll Records” book in a locked area. This book is in a locked cabinet. Archived records from prior years are also kept in a locked file or in offsite locked storage. Individual timesheets are retained in the locked file.

MONTH END CLOSING:

All bank reconciliations are completed. All financial statements to be given to the board of directors are prepared by the Bookkeeper and reviewed by the E.D.

YEAR END CLOSING:

Reports that must be filed on a yearly basis are:

W-2

Filed by ADP.

941

Filed by ADP.

1099

Prepared and sent by WCN to any non-employee individual or partnership (excluding corporations) who receives greater than \$600.00 annually from the WCN.

990

Prepared by Bookkeeper or independent auditor per Board Direction. Copies are provided to each board director and any individuals, organizations, and regulatory bodies authorized to review such information.

Audit

Formal financial audits will be conducted either as required by regulators, funders and/ or contractors or as required by the Board of Directors.

BUDGET PROCEDURES:

Expense Management:

The organization will consistently approach its expense management in order to conserve its resources and to reflect its not-for-profit IRS status.

Common Cost Allocations:

Direct Expenses: Any direct costs for Program Delivery are assigned directly to a specific program when incurred. The FOA direct expense with the respective program for which is incurred if it is not for Administration or general fundraising. In turn, the FOA then ensures that the Bookkeeper receives that allocation documentation for our financial records documentation.

Indirect Expenses: A portion of rent, general telephone, IT or any other “common” costs is assigned to Program Delivery, Administration or General Fundraising based on the staff’s hours allocation, as identified above (85% Program, 10% Administration, 5% General fundraising overall) unless otherwise specified by the E.D. The Bookkeeper allocates the correct proportion of these indirect or “common” expenses as identified.

Percentages referenced are re-evaluated annually for accuracy, and allocations adjusted accordingly.

Business Expense Management:

Business-required expenses will be reimbursed to the employee monthly. Business expenses must be submitted to the FOA, who will then submit all sheets to the E.D. for approval and signature, on the WCN Expense Reimbursement form (see appendix E), with receipts for all expenses over \$10.00. Each receipt must reflect the type of expense and names of any individuals covered by that expense.

Travel: Mileage, tolls, and ferry fees between the employee’s home and the worksite or alternative designated worksite are not reimbursed. All other mileage for WCN work is reimbursed at the current Federal Privately Owned Vehicle Reimbursement Rate. Tolls and ferry fees for work-related travel are reimbursed. The least expensive travel option for business travel will be funded or reimbursed by WCN for travel other than daily travel

Travel Advances: employees may request advances to fund food, taxis, etc. while on authorized WCN Business. The “Travel Advance” request form should be filled out at least two weeks prior to the event, approved by the E.D. (or designee) and then completed after the travel. Any overages in funding must be documented and the funds returned to WCN in cash or a check, no later than five working days after the employee returns.

Lodging: Hotel costs are reimbursed at the rate available for the business meeting. For non-seminar or non-educational meetings, hotel reimbursement is allowed up to \$240 per day depending on the seasonal rates and location or unless otherwise authorized.

Meals: When traveling, meal reimbursement is allowed up to \$74.00 per day, unless otherwise authorized. Expenses for alcohol are not reimbursed.

Parking: Airport parking for employee vehicles when traveling for WCN is allowed up to \$20.00 per day. Parking expenses incurred for business meetings during work days are reimbursed at the level expended. Employee parking at the worksite is not reimbursed, although reduced rates may be available from the hosting worksite.

Gifts: Gifts to employees or Board members valued at \$50.00 or less will not incur a tax burden for the employee/board member. It will be the decision of the Board of Directors as to whether WCN absorbs the tax associated with a gift valued at over \$50.00 or whether that gift is identified as taxable to the employee.

Purchases: See “Purchases” requirements under “Cash Disbursement” section above.

Policies regarding payroll and reimbursement to employees, vendors, or contractors of WCN are found in the document “Human Resources Policies and Procedures.”

BUDGET MANAGEMENT:

The annual budget plan will be developed by the Executive Director (E.D.), with direction from the Board Finance/Audit Committee and WCN’s financial advisors. Current budget performance, anticipated income and expenses for the next year, and trends in non-profit financial management will be utilized to create the budget. It will be submitted to the Board for review and approval no later than the final Board meeting each year.

Monthly financial performance reports will be prepared by the E.D, FOA and Bookkeeper and submitted to the Board at its regular meeting for review and comment.

CONFIDENTIALITY OF INFORMATION:

Except where required by law, all financial information remains confidential and is the sole property of WCN.

Information regarding individual and organizational contributions to WCN is confidential and will be held as such. The Officers of the Board and the Finance/Development Committees shall have access to this detailed information for the purpose of identifying potential donors but for no other reason. WCN utilizes the “Donor Bill of Rights” (see appendix F) in its management of donor information.

All donors will receive written acknowledgment of their donation by mail, verifying the specific donation and including WCN’s Tax ID number.

APPENDICES:

- A. Petty Cash Disbursement form.doc
- B. Donor Spreadsheet.xls
- C. Thank you form letter to contributors
- D. Purchase Request form
- E. WCN Expense Reimbursement Form.xls
- F. *A Donor Bill of Rights* (courtesy Association of Fundraising Professionals)

Original 10/14/04

Revised 3/05

Second Revision approved 8.03.06

Third Revision approved 8.14.07

Fourth Revision approved 9.08

Fifth Revision approved 12.08

Sixth Revision approved 9.09

Seventh Revision approved 9.10

Eighth Revision approved 7.11.13

Ninth Revision approved 10.7.14

Tenth Revision approved 10.5.17

Appendix B

WCN Contributions by Category FY 2009

Corporations, Fdns, etc.	Date	Amount	Comments
	Jan 20	\$250	
	Mar 12	\$10,000	
	Mar 13	\$5,000	
	Mar 16	\$500	
	Mar 20 & May 15	\$20,000	
	Apr 9	\$5,000	
	Apr 10	\$5,000	
	Apr 15	\$1,000	
	Apr 27	\$1,000	
	May 15	\$7,500	
TOTAL		\$55,250	
Individuals			
	Feb 2	\$100	
	Feb 9	\$100	
	Feb 11	\$50	
	Feb 13	\$25	
	Feb 23	\$200	
	Mar 3	\$200	
	Mar 17	\$100	
	Apr 3	\$500	
	Apr 14	\$200	
	May 1	\$200	
	Jun 5	\$100	
	Jun 25	\$250	
	Jun 26	\$150	
	Jun 30	\$100	
* WCN Board members			
TOTAL		\$2,275	
TOTAL TOTAL		\$57,525	

updated 7/209

Appendix C

Print on Letterhead

September 15, 2014

[Name] [Title]
[Organization]
[Address]
[City, State, Zip]

Dear [First Name],

Please accept my thanks for your generous unrestricted gift of \$[dollar amount] to the Washington Center for Nursing on behalf of [Organization Name]. Your unrestricted gift is critical to achieving our mission of ensuring that there is a highly qualified nurse workforce to meet future demands for a healthy Washington.

Your investment will help us increase the database about our nursing workforce, improve work environments for nursing practice, support our work to transform nursing education in our state, and to enhance the image and information for potential nursing as a career.

Please visit our website for regular updates and feel free to contact me or the Executive Director, Linda Tieman, to discuss ideas or comments you may have about the Washington Center for Nursing's work.

Sincerely,

[Signature]

[Name]
President
Board of Directors

Our Mission

To contribute to the health and wellness of people in Washington State by ensuring that there is an adequate nursing workforce to meet the current and future healthcare needs of our population.

TAX ID: 68-0568743. WCN has given no goods or services in return for this gift.

Appendix D



WCN
WASHINGTON CENTER FOR NON-PROFIT

PURCHASE REQUEST

Date _____ Requested by _____

Item Requested _____

Base Price \$ _____ Total with tax, shipping/delivery \$ _____

Item covered in budget? Yes No **Any purchase totaling \$250 or more requires ED approval**

Approved by _____ Date _____

Date purchased _____ Actual price paid \$ _____

Rev. 2/2009

Appendix E



Employee Expense Report

Employee: [Name]

Employee # [number]

Employee Signature:
 Supervisor Signature:

Hire Date: [date]

Please fill in, print, sign, and mail to WCN office.

LINE #	DATE	EXPENSE DETAIL	MILES ¹	COST ²	PARKING	MEALS	TRAVEL ³	LODGING	MISC.	TOTAL
1				\$0.00						\$0.00
2				\$0.00						\$0.00
3				\$0.00						\$0.00
4				\$0.00						\$0.00
5				\$0.00						\$0.00
6				\$0.00						\$0.00
7				\$0.00						\$0.00
8				\$0.00						\$0.00
9				\$0.00						\$0.00
10				\$0.00						\$0.00
11				\$0.00						\$0.00
12				\$0.00						\$0.00
13				\$0.00						\$0.00
14				\$0.00						\$0.00
15				\$0.00						\$0.00
16				\$0.00						\$0.00
17				\$0.00						\$0.00
18				\$0.00						\$0.00

Total expenses by category

Total to be reimbursed to employee To be entered by Supervisor or ED

Notes: _____

1: Number of miles driven in personal vehicle
 2: \$.56/mile effective 1/1/14
 3: Airfare, train, taxi, shuttle, bus fare

Please Note: All receipts for the listed expenses need to accompany this form.
 Any meals/food must have the names of individuals for whom food was purchased recorded on the receipt or with the receipt.

Appendix F

A Donor Bill of Rights

PHILANTHROPY is based on voluntary action for the common good. It is a tradition of giving and sharing that is primary to the quality of life. To assure that philanthropy merits the respect and trust of the general public, and that donors and prospective donors can have full confidence in the not-for-profit organizations and causes they are asked to support, we declare that all donors have these rights:

I.

To be informed of the organization's mission, of the way the organization intends to use donated resources, and of its capacity to use donations effectively for their intended purposes.

II.

To be informed of the identity of those serving on the organization's governing board, and to expect the board to exercise prudent judgement in its stewardship responsibilities.

III.

To have access to the organization's most recent financial statements.

IV.

To be assured their gifts will be used for the purposes for which they were given.

V.

To receive appropriate acknowledgement and recognition.

VI.

To be assured that information about their donations is handled with respect and with confidentiality to the extent provided by law.

VII.

To expect that all relationships with individuals representing organizations of interest to the donor will be professional in nature.

VIII.

To be informed whether those seeking donations are volunteers, employees of the organization or hired solicitors.

IX.

To have the opportunity for their names to be deleted from mailing lists that an organization may intend to share.

X.

To feel free to ask questions when making a donation and to receive prompt, truthful and forthright answers.

DEVELOPED BY

Association of Fundraising Professionals (AFP)
Association for Healthcare Philanthropy (AHP)
Council for Advancement and Support of Education (CASE)
Giving Institute: Leading Consultants to Non-Profits

ENDORSED BY

(in formation)

Independent Sector
National Catholic Development Conference (NCDC)
National Committee on Planned Giving (NCPG)
Council for Resource Development (CRD)
United Way of America