

**ARCHDIOCESE OF INDIANAPOLIS**  
**Annual Financial Report**  
**6/30/2017**

**WE THE UNDERSIGNED HEREBY CERTIFY THAT WE HAVE EXAMINED  
THE ANNUAL FINANCIAL REPORT FOR THE YEAR ENDED JUNE 30, 2017  
AND FIND IT TO AGREE WITH THE PARISH/SCHOOL/HIGH SCHOOL BOOK OF ACCOUNTS.**

# \_\_\_\_\_ Parish/School/High School Name \_\_\_\_\_

*SIGNATURE*

*DATE*

\_\_\_\_\_  
Preparer of Annual Financial Report

\_\_\_\_\_  
Finance Council Chairperson

\_\_\_\_\_  
Pastoral Council Chairperson/School Commission Chairperson

\_\_\_\_\_  
Parish Pastor/Administrator/Principal

**THANK YOU FOR SUBMITTING YOUR 2016-2017 ANNUAL FINANCIAL REPORT  
ON OUR ONLINE SURVEY. YOUR REPORT WILL BE COMPLETE WHEN THIS  
SIGNATURE FORM IS RECEIVED BY THE ARCHDIOCESE.**

**DUE DATE: SEPTEMBER 15, 2017**  
**PLEASE EMAIL COMPLETED FORM TO:**  
**accountingservices@archindy.org (preferred method)**  
**OR FAX TO: ATTN: OAS @ 317-236-7327**