U.S. Department of Labor Pension and Welfare Benefits Administration



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ubject: PLANS	Date
Case Name Address	By Investigator/Auditor
	Approved By
EIN/PN -	Status CLOSED
I. <u>Predication</u> (State the reason for the case opening and for conducting	an investigation.)
II. Background	
Plan Sponsor:	
Plan Type:	
As of / / : Assets: Par Period Covered by Investigation: / / to /	rticipants:
Period Covered by Investigation: / / to / Other Plans Reviewed:	/
Other Flans Reviewed:	
III. <u>Areas Examined</u> Other Loans	_ Income/Earnings
Rptq. & Disclosure ER Sec./Real Prop	_ Expenses
Contributions Ptrships/Jt. Venture	_ Valuations
Stocks & Bonds Other Investments Real Estate Receivables/Payables	_ Cash
Real Estate Receivables/Payables	_ Insurance Benefits
Mortgages Liabilities Other:	_ Benefics
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IV. <u>Records Reviewed</u> (For each item checked, supporting documentation be retained in the case file.)	optained during the investigation should
Trustee/Corp Minutes Forms 5500	_ Real Estate/Mortgage
Correspondence Files Financial Stmts	
Service Prov Contracts Rcpts/Disbs	
Insurance Contracts Bank/Inv Stmts	Venture
Insurance Contracts Bank/Inv Stmts Plan/Trust Documents Loan Records	_ Stock Records Participant Records
Bond Liability Ins.	
Other:	
V. <u>Interviews Conducted</u> (Supporting documentation for each interviews	ew conducted should be retained in the
case file.)	
Trustee(s) Plan Administrator	Plan Accountant
Corporate Personnel Plan Attorney	
Other:	

VI. <u>Issues Identified & Resolution</u> (Provide a brief description of the issues identified and the facts showing that the allegations/issues were not violations.)