



# Christ Our Hope Catholic Church

1786 Wellborn Road, Lithonia, Georgia 30058, USA

PHONE: (770) 482-5017 (770) 482-5018 FAX: (770) 482-9476

E-Mail: [parish@christourhopeatl.org](mailto:parish@christourhopeatl.org)

## YEAR END PARISH CERTIFICATION LETTER

For Fiscal Year 2024-2025

September 30, 2025

Archbishop Hartmayer,

As pastor of Christ Our Hope Catholic Church, it is my responsibility each year to render an account to the faithful concerning the management of the temporal goods of the Church, including the financial support offered by the faithful, and to submit this report to you. I am assisted in my duty by my Finance Council and my administrative staff.

In submitting this report, each of the undersigned affirms to the best of our knowledge:

- The financial reports accurately reflect the financial condition of the parish.
- Parish financial statements were reviewed and approved.
- All federal and state payroll taxes were paid.
- The accounts payable vendors were reviewed to ensure proper classification as to taxability and compliance with IRS regulations, and the issuance and filing of the appropriate 1099 forms.
- All non-exempt real property taxes were paid.
- All of our activities are religious, educational, or charitable, except as noted here:  
\_\_\_\_\_
- None of us know of any credible reports of possible fraudulent or dishonest conduct, which has not been reported to the Archbishop or his staff.
- None of the individuals named and signing below, nor any member of their families, has engaged in any activity with the parish from which we could personally benefit and be considered a conflict of interest without fully disclosing the conflict to the pastor and Finance Council.

Sincerely Yours in Christ,

Signature on File

Pastor

Signature on File

Parish Treasurer

Signature on File

Business Manager or Bookkeeper

Date

Date

Date





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Finance Council Member #1

Signature on File

Please Print Name

Michael W. Neil

Finance Council Member #2

Signature on File

Please Print Name

DAVID SHORTER

Finance Council Member #3

Signature on File

Please Print Name

Joa B. THIBODEAUX

Finance Council Member #4

Signature on File

Please Print Name

M. McCormack

Finance Council Member #5

Signature on File

Please Print Name

Linda E. Obata

Finance Council Member #6

Signature on File

Please Print Name

CLAUDETTE A. WELLS

Finance Council Member #7

Please Print Name

Add Additional Members as Needed

## Dates of the Finance Council Meetings

Date #1 1-27-2025 Date #7 \_\_\_\_\_

Date #2 6-23-2025 Date #8 \_\_\_\_\_

Date #3 9-8-2025 Date #9 \_\_\_\_\_

Date #4 TBA Date #10 \_\_\_\_\_

Date #5 \_\_\_\_\_ Date #11 \_\_\_\_\_

Date #6 \_\_\_\_\_ Date #12 \_\_\_\_\_