## LUNENBURG HOUSING AUTHORITY

Lunenburg, Massachusetts

## REPORT ON AGREED-UPON PROCEDURES

**December 31, 2017** 

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## INDEPENDENT ACCOUNTANTS' REPORT ON APPLYING AGREED-UPON PROCEDURES

To The Board of Commissioners Lunenburg Housing Authority Lunenburg, Massachusetts

We have performed the procedures enumerated below, which were agreed to by the Board of Commissioners, the Department of Housing and Community Development (DHCD) and management of the Lunenburg Housing Authority, solely to perform the agreed-upon procedures, as prescribed by the Massachusetts Department of Housing and Community Development for the year ended December 31, 2017. The Lunenburg Housing Authority's management is responsible for management decisions and functions and maintaining internal controls, including monitoring ongoing activities. This agreed-upon procedures engagement was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants. The sufficiency of these procedures is solely the responsibility of those parties specified in this report. Consequently, we make no representation regarding the sufficiency of the procedures described below either for the purpose for which this report has been requested or for any other purpose.

The procedures and the associated findings are presented in the Schedule of Agreed-Upon Procedures included in this report.

We were not engaged to and did not conduct an examination, the objective of which would be the expression of an opinion on the effectiveness of the Lunenburg Housing Authority's internal controls or on compliance with certain provisions of laws, regulations, contracts, and grant agreements. Accordingly, we do not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of the Board of Commissioners, DHCD and management of the Lunenburg Housing Authority, and is not intended to be and should not be used by anyone other than these specified parties.

Braintree, Massachusetts

upder Hirly

August 13, 2018

| <b>Housing Authority:</b> | <b>Lunenburg Housing Authority</b> |
|---------------------------|------------------------------------|
|---------------------------|------------------------------------|

Fiscal Year End (FYE): 12/31/2017 Date AUP Conducted: 6/14/2018

**Executive Director: Peter Proulx, Management Agent** 

CPA: Guyder Hurley, P.C. CPA Phone: 617-376-6226

| A. Rent Collection / Tenant Accounts Receivable / Account Write-Offs   |                    |
|--|--------------------|
| Number of Category Exceptions: 0 Category Rating: No Findings  |                    |
| A. Rent Collection – Walk-through of sample (Small - 3, Med - 5, Large - 7, Very Large - 9) of individual rent receipts to ensure all the following steps are being executed.  | No Exception Found |
| Log of rent collected is complete, accurate and includes all necessary information.     Post-dated checks for current amount due is not accepted payment by LHA.   | NE<br>NE           |
| 3. Trace amounts from receipt log to deposit slip for bank. Cash is deposited daily per DHCD guidelines (per Accounting Manual Sec. 8, p. 3). Except IF: LHA h only one administrative employee who deposits cash at least weekly.   | as NE              |
| <ol> <li>Reconcile tenant ledger with receipt log, bank deposit and General Ledger.</li> <li>What is on General Ledger matches bank statement (bank reconciliation) and Operating Statement and Balance Sheet (51-1 and 51-2 respectively).</li> </ol>   | NE<br>NE           |
| B. Rent Collection – Segregation of Duties   | No Exception Found |
| <ol> <li>Document and evaluate internal controls and segregation of duties for steps 1 to 5 above. For LHAs with only one administrative employee: if sufficient int controls and segregation of duties are not in place, there are mitigating controls in place, such as reporting the frequency/amount of credit adjustments to th board or fee accountant.</li> </ol> |                    |
| C. Rent Collection – Tenant Accounts Receivables (TAR)   | No Exception Found |
| <ol> <li>Aging of Tenant Accounts Receivable is matched to the General Ledger and to the Balance Sheet TAR (51-2).</li> </ol>  | NE                 |
| 2. Draw a sample of uncollected TAR accounts (Small - 3, Med - 5, Large - 7, Very Large - 9). Rent Collection is in compliance with LHA rent collection policy (p Contract for Financial Assistance (CFA) and Management Plan IIIC).   | er <b>NE</b>       |
| <ol><li>Allowance for Doubtful Accounts is determined in accordance with GAAP and LHA has evaluated estimate on annual basis. Reasonable allowance based or<br/>historical data. Repayment Agreements reconcile to the Balance Sheet/Operating Statements and are in accordance with DHCD policy.</li></ol>  | NE                 |
| D. Account Write-Offs – Walk-through uncollected rent that was written-off.  If no write-offs can be found, please select N/A option from drop down for <u>both</u> steps 1 and 2.   | No Exception Found |
| 1. Obtain detail of write-offs and verify that write-offs are in accordance with DHCD policy.  | NE                 |
| 2. Documentation of Board approval to write-off account (board approval of write-off required per budget guidelines for Acct #4570 - Collection Loss).   | NE                 |
| Exceptions Noted:  |                    |
| Internal Control Recommendation:   |                    |
| Authority's<br>Response:   |                    |

| Housing Authority: Lunenburg Housing Authority  |   |                    |  |  |  |
|---|---|--------------------|--|--|--|
| B. Payroll/Fringe Benefits  |   |                    |  |  |  |
| Number of Category Exceptions: 0 Category Rating: No Findings                                       |   |                    |  |  |  |
| A. Wage Reconciliation  | on  | No Exception Found |  |  |  |
| · ·   | lytically (not to exact amount) that FYE-end wages gross payroll reported on the LHA's General Ledger for all programs and all employees matches amounts reported on Forms 941 and WR-1 (state and federal filings).  | NE                 |  |  |  |
| analytically (\<br>the LHA's Top  | ICD-approved budget <i>Schedule of All Salaries and Positions "Report"</i> in HAFIS and identify five highest paid salaries from all funding sources. Verify within % ANUEL increase for that year - exclude overtime in calculation for maintenance employees) that it matches the amount reported at FYE on the properties of the properties of the should have a copy on file). Verify the amount reported on the Top 5 Compensation Form matches acately the amount reconciled Form 941 and the corresponding state online submission (mass.gov/lwd/unemployment-insur/employers/). | NE                 |  |  |  |
| DHCD and wa   | ossession of DHCD-approved executive contract signed by the LHA, Executive Director and DHCD. If LHA can show that currently being processed by as not returned to the LHA for failing to meet DCHD's requirements, LHA can produce the last DHCD-approved executive contract signed by the LHA, ector and DHCD.  | NE                 |  |  |  |
| B. Select a Single Pay  | Period:   | No Exception Found |  |  |  |
| 1. Trace time   | sheets/timecards to the payroll register.   | NE                 |  |  |  |
| 2. Test for co  | mpleteness and accuracy.  | NE                 |  |  |  |
| <ol><li>Proper cor<br/>maintains a t</li></ol>  | ntrols and approvals are in place, i.e. employees sign timesheets, the Executive Director signs off on employee timesheets, and the Executive Director imesheet.  | NE                 |  |  |  |
| C. Obtain a compensa  | ated absences liability schedule:   | No Exception Found |  |  |  |
| 1. Test for co<br>Balance Shee<br>will be accru<br>and; (3) a cap<br>benefits (par<br>received by t | NE  |                    |  |  |  |
| 2. Proper cor   | ntrols and approvals are in place, i.e. Executive Director approves employee compensated absences.  | NE                 |  |  |  |
| 3. Compensa   | ted absences should be tracked apart from the timesheets, and verification with timesheets should be performed.   | NE                 |  |  |  |
|   | nd Accumulated leave time matches. Time is accruing as it should.   | NE                 |  |  |  |
| Exceptions<br>Noted:  |   |                    |  |  |  |
| Internal Control<br>Recommendation:   |   |                    |  |  |  |
| Authority's<br>Response:  |   |                    |  |  |  |

| Housing Authority: Lunenburg Housing Authority  |                    |  |  |  |  |
|---|--------------------|--|--|--|--|
| C. Accounts Payable/Disbursements   |                    |  |  |  |  |
| Number of Category Exceptions: 0 Category Rating: No Findings   |                    |  |  |  |  |
| A. Select a sample (Small - 3, Med - 5, Large - 7, Very Large - 9) of operating and capital expenditures (at least 1 of each type if have).     | No Exception Found |  |  |  |  |
| 1. Approval and Segregation of Duties   | NE                 |  |  |  |  |
| 2. Accuracy   | NE                 |  |  |  |  |
| 3. Supporting Documentation   | NE                 |  |  |  |  |
| 4. Allowability   | NE                 |  |  |  |  |
| 5. Allocation   | NE                 |  |  |  |  |
| 6. Classification   | NE                 |  |  |  |  |
| C. Select a sample (Small - 6, Med - 10, Large - 14, Very Large - 18) of credit card/debit card statements.                                     | No Exception Found |  |  |  |  |
| If no credit/debit expenditures can be found, please select N/A option from drop down for <u>all</u> steps 1 to 8.                              |                    |  |  |  |  |
| Approval and Segregation of Duties  | NE                 |  |  |  |  |
| 2. Accuracy   | NE                 |  |  |  |  |
| 3. Supporting Documentation (CPAs: include date, description of charge and amount of transaction for each purchase missing documentation below) | NE                 |  |  |  |  |
| 4. Allowability   | NE                 |  |  |  |  |
| 5. Allocation   | NE                 |  |  |  |  |
| 6. Classification   | NE                 |  |  |  |  |
| 7. No Sales Tax Paid  | NE                 |  |  |  |  |
| 8. Card is in Housing Authority name; not Executive Director (or any other staff member) name.  | NE                 |  |  |  |  |
| D. Select a sample (Small - 3, Med - 5, Large - 7, Very Large - 9) of employee reimbursements (include at least one travel reimbursement).      | No Exception Found |  |  |  |  |
| 1. Approval and Segregation of Duties   | NE                 |  |  |  |  |
| 2. Accuracy   | NE                 |  |  |  |  |
| 3. Supporting Documentation   | NE                 |  |  |  |  |
| 4. Allowability   | NE                 |  |  |  |  |
| 5. Allocation   | NE                 |  |  |  |  |
| 6. Classification   | NE                 |  |  |  |  |
| Exceptions Noted:   |                    |  |  |  |  |
| Internal Control Recommendation:  |                    |  |  |  |  |
| Authority's<br>Response:  |                    |  |  |  |  |

| Housing Authority: Lunenburg Housing Authority  |                    |
|---|--------------------|
| D. Inventory (Fixed Assets)   |                    |
| Number of Category Exceptions: 0 Category Rating: No Findings   |                    |
| Obtain a copy of the depreciation schedules/fixed asset listing:  | No Exception Found |
| 1. Inventory listing includes both capitalized and non-capitalized items (such as refrigerators, stoves, community room equipment, office equipment, etc.) of \$1,000 or more. It also includes all necessary information, including a tag with an LHA-assigned number for all assets of \$1,000 or more (and all refrigerators stoves of any value). | and NE             |
| 2. Depreciation schedule/fixed asset listing includes all relevant assets of \$5,000 or more. It also includes all necessary information to sufficiently identify an a For vehicles, that includes the make/model/year and for modernization jobs the Fish number.  | nsset. NE          |
| 3. Items on depreciation schedule/fixed asset listing are being accurately depreciated.   | NE                 |
| 4. Reconcile depreciation schedule/fixed asset listing to Form 51-1 (Operating Statement) and General Ledger and evaluate for completeness and sufficiency detail.  | of NE              |
| 5. Verify analytically that items listed still exist and are in possession of LHA.  | NE                 |
| 6. Assets are appropriately allocated between Federal and State on General Ledger, Operating Statement (51-1), and depreciated according to which funds wused for purchase.   | ere NE             |
| Capitalization Policy   | No Exception Found |
| 1. Verify capitalization policy is within state established limits (per Accounting Manual, Sec. 16, p.3).   | NE                 |
| Vehicles  | No Exception Found |
| <ol> <li>Confirm vehicles are listed on fixed asset listing, and trace vehicles listing to insurance policies.</li> </ol>   | NE                 |
| Exceptions Noted:   |                    |
| Internal Control<br>Recommendation:   |                    |
| Authority's Response:   |                    |

| Housing Authority: Lunenburg Housing Authority   |   |
|--|---|
| E. Procurement/Public Bidding for Goods and Services   |   |
| Number of Category Exceptions: 0 Category Rating: No Findings  |   |
| For A to C below, examine the cash disbursements journal (or check register) as well as the contract register and identify purchases of goods and services during the year procured. From these purchases that should have been competitively procured, select a sample (Small - 3, Med - 5, Large - 7, Very Large - 9) of known or possible procure possible when selecting the sample, include at least one procurement valuing \$10,000 to \$35,000 and one procurement valuing \$35,000 or more (for goods and services for sample were not competitively procured, enter as an exception in A. For sampled purchases that went through procurement, follow procedures under B or C below depe | ements valuing \$10,000 or more; if<br>or MGL c. 30B only). If any in the |
| A. Competitive Procurement When Required   | No Exception Found  |
| 1. Verify that sampled purchases for goods and services that should have been competitively procured as defined per MGL c. 30B were competitively procured.  | NE  |
| B. Known procurements valuing (pre 11/7/16 - \$10,000 up to \$35,000 OR post 11/7/16 \$10,000 up to and including \$50,000) (for goods and services for MGL c. 30B only). If no procurement can be found valuing \$10,000 up to \$35,000, please select N/A option from drop down for each step 1 - 7 below.   | No Exception Found  |
| 1. (pre 11/7/16) Proper selection based on MGL c.30B s.5 IFB requirements/(post 11/7/16) Proper selection based on MGL c.30B s.5 solicitation of quotes requirements.  | NE  |
| 2. (pre 11/7/16) Documentation of solicitation of at least three oral or written quotes/(post 11/7/16) Documentation of a written purchase description with solicitation of written quotes from at least three persons.  | NE  |
| 3. Contract is DHCD-approved template or developed by LHA (not a vendor contract).   | NE  |
| 4. Contract was for not more than 3 years unless majority board vote allowed it to be longer.  5. Board vote is documented approving individual contract, or a board vote to delegate authority over certain contracts (by dollar threshold or other criteria) to an   | NE  |
| LHA staff member, usually Executive Director.  | NE  |
| 6. Contract did not go through automatic renewals unless renewals were part of the original procurement.   | NE  |
| 7. LHA Procurement Policy exists (per Accounting Manual Sec. 16, p.2) and is compliant with MGL c. 30B elements mentioned in 1 to 6 above.  C. Known procurements valuing (pre 11/7/16 - \$35,000 or more OR post 11/7/16 more than \$50,000) (for goods and services for MGL c. 30B only). If no procurement  | NE  |
| can be found in this value range, please select N/A option from drop down for <u>each</u> step 1 - 8 below.  | No Exception Found  |
| 1. Proper selection based on MGL c.30B s.5 IFB requirements or MGL c.30B s.6 RFP requirements. (post 11/7/16 only: If using MGL C.30B s.6 RFP requirements, LHA must have a Chief Procurement Officer (CPO) conduct the procurement under c.30B s.6.)  | NE  |
| 2. (pre 11/7/16) Documentation of Newspaper advertisement two week prior to bidding process/(post 11/7/16)  Documentation of Newspaper advertisement, LHA's Office and COMMBUYS two weeks prior to bidding process.  | NE  |
| 3. If contract was for over \$100K, it was advertised in the Goods & Services Bulletin.  | NE  |
| 4. If IFB, contract award went to lowest bidder. If RFP, contract went to lowest bidder or letter explaining why went with another bidder.   | NE  |
| 5. Contract is DHCD-approved template or developed by LHA (not a vendor contract).  6. Board vote is documented approving individual contract, or a board vote to delegate authority over certain contracts (by dollar threshold or other criteria) to an  | NE  |
| LHA staff member, usually Executive Director.  | NE  |
| 7. Contract did not go through automatic renewals unless renewals were part of the original procurement.   | NE  |
| 8. LHA Procurement Policy exists (Accounting Manual Sec. 16, p.2) and is compliant with MGL c. 30B elements  | NE  |
| mentioned in 1 to 7 above.  D. Obtain a copy of the contract register and verify:  | No Exception Found  |
| 1. Contract register exists and includes all modernization as well as goods and services contracts (per Accounting Manual, Sec. 6, p.12)/PHN 2017-14.  | NE<br>NE  |
| 2. For each contract, it includes the following information: contractor, description, active/inactive, start date, end date, extensions available, contract award  | NE  |
| amount, change orders amount, contract expenditures to date and remaining value.  3. Evaluate for completeness by analyzing the cash disbursements journal against the contract register.  | NE  |
| Exceptions Noted:  | NL  |
| Internal Control Recommendation:   |   |

Authority's Response:

| Housing Authority: Lunenburg Housing Authority |   |          |                                      |   |                    |
|--|---|----------|--------------------------------------|---|--------------------|
| F. Cash Management and Investment Practices    |   |          |                                      |   |                    |
|  | Number of Category Exceptions:  | 0        | Category Rating:                     | No Findings   |                    |
| •  | d year-end bank statements:   |          |                                      |   | No Exception Found |
| <ol> <li>Test the m<br/>was covered</li> </ol> | nonthly bank reconciliation to ensure that the follow earlier).         | ing two  | match: General Ledger and bank sta   | atements (exclude deposits of rent collected as th  | NE NE              |
|  | at have been issued and marked on General Ledger econciliation process. | out have | e not been cashed (not on bank state | ement), known as checks in transit are identified a | s a NE             |
| B. Bank and Investme                           | ent Accounts  |          |                                      |   | No Exception Found |
| 1. Verify that                                 | banking and investment accounts are properly insu                       | red or c | collateralized (per Accounting Manua | al Sec. 16, p.7)                                    | NE                 |
| Exceptions<br>Noted:                           |   |          |                                      |   |                    |
| Internal Control<br>Recommendation:            |   |          |                                      |   |                    |
| Authority's<br>Response:                       |   |          |                                      |   |                    |

| G. Operating Subsidy   |                    |  |  |  |
|--|--------------------|--|--|--|
| Number of Category Exceptions: 0 Category Rating: No Findings  |                    |  |  |  |
| . Obtain copy of DHCD-approved budget exemptions. no DHCD-approved exemptions, please select N/A option from drop down for step 1 below.                         | No Exception Found |  |  |  |
| 1. Compare DHCD-approved budget exemptions for direct reimbursement (as found in the ANUEL & Subsidy Worksheet - Section 8) to LHA record of actual              |                    |  |  |  |
| expenses to the General Ledger.  | NE                 |  |  |  |
| . Revenue Reconciliation   | No Exception Found |  |  |  |
| 1. Reconcile revenue to the General Ledger. Compare revenue reported in Accounts #3110, #3190, #3610 and #3690 in the Operating Statement (51-1) to the          | •                  |  |  |  |
| General Ledger to the amounts reported in the ANUEL & Subsidy Worksheet.   | NE                 |  |  |  |
| . Utility Reconciliation   | No Exception Found |  |  |  |
| 1. Reconcile utilities to the General Ledger. Compare utilities reported in Account #4300 on the Operating Statement (51-1) to the General Ledger to the amounts | NE                 |  |  |  |
| reported in the ANUEL & Subsidy Worksheet.   |                    |  |  |  |
|  |                    |  |  |  |
| Noted:   |                    |  |  |  |
| Noted:  Internal Control Recommendation:   |                    |  |  |  |

|   | Housing Authority: Lunenburg Housing Authority  |                                      |  |  |
|---|---|--------------------------------------|--|--|
| H. Annual Rent Calculation and Compliance |   |                                      |  |  |
|   | Number of Category Exceptions: 0 Category Rating: No Findings   |                                      |  |  |
|   | D below, select a sample (Small LHA - 5, Medium LHA - 10, Large or Very Large LHA - 15) of tenant files (from programs 200, 667, 705); if the LHA has nected per manager. Conduct A to C and E, if have MRVP, sample 10% (min:1 max:15) of leased MRVP units.                                       | nultiple property managers, at least |  |  |
| A. Obtain the rent rol                    | l and HAP roll:   | No Exception Found                   |  |  |
| •   | ytically the completeness of the resident population. (Rent roll and HAP roll support what is reported on Operating Statement Form 51-1).   | NE                                   |  |  |
| B. Timeliness of Annu                     | al Rent Calculation   | No Exception Found                   |  |  |
| •   | liness of annual rent redetermination (occurs one year from move-in date or last annual recertification). Except IF: LHA can produce DHCD waiver for annual rent redetermination requirement and has done rent redetermination once within 2 years of move-in date or last annual recertification). | NE                                   |  |  |
| C. Accuracy of Rent C                     |   | No Exception Found                   |  |  |
|   | alculation for proper verification of income, expenses and deductions.  | NE                                   |  |  |
|   | ly composition for allowance purposes.  | NE                                   |  |  |
|   | ation of income, exclusions from income, and deductions.  | NE                                   |  |  |
|   | ications Regarding Rent Changes fication of rent redetermination sent at least 60 days prior to effective date (see 760 CMR 6.04 (4)(b)).   | No Exception Found<br>NE             |  |  |
|   | ce of Rent Change sent no less than 14 days prior to effective date (see 760 CMR 6.04 (4)(e)).  | NE<br>NE                             |  |  |
|   | liness and proper execution of Lease Addendum (see 760 CMR 6.06 (5)(q)).  | NE                                   |  |  |
|   | ion (starting with AUPs conducted after 7/31/17)  | Not Applicable                       |  |  |
| 1. MRVP file                              | has Certificate of Fitness (COF).   | N/A                                  |  |  |
| 2. MRVP file                              | has Letter of Compliance for Lead Paint if child <6 years old and building built prior to 1978 with no new construction permit.   | N/A                                  |  |  |
| 3. MRVP file                              | has Proof of Ownership which is either 1. Deed/Online Printout from Registry of Deeds or 2. Proof of Insurance or 3. Tax Documents.   | N/A                                  |  |  |
| 4. MRVP file                              | nas W9.   | N/A                                  |  |  |
| Exceptions<br>Noted:                      |   |                                      |  |  |
| Internal Control<br>Recommendation:       |   |                                      |  |  |
| Authority's<br>Response:                  |   |                                      |  |  |