

| Outline of work undertaken as part of the internal audit (NB not required if detailed internal audit report presented to body)                                                                                                                                                                                     | Agreed? | Yes | No* | N/A | covered** |  |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-----|-----|-----|-----------|--|--|--|--|
|                                                                                                                                                                                                                                                                                                                    |         |     |     |     |           |  |  |  |  |
| Quarterly financial report to 31st June seen. Also end of year statement agreeing Cash Book calculations is included in the year end Bank Account reconciliation                                                                                                                                                   | X       | X   |     |     |           |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                    |         |     |     |     |           |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                    |         |     |     |     |           |  |  |  |  |
| Year end reconciliation seen. Not all month end balances reconciled.                                                                                                                                                                                                                                               |         |     |     |     |           |  |  |  |  |
| Insert text                                                                                                                                                                                                                                                                                                        |         |     |     |     |           |  |  |  |  |
| 11. Trust funds (including charitable trusts). The Council/Board/Committee has met its responsibilities as a trustee.                                                                                                                                                                                              |         |     |     |     |           |  |  |  |  |
| 10. Accounting statements prepared during the year were prepared on the correct accounting basis (receipts and payments/income and expenditure), agreed with the cashbook, were supported by an adequate audit trail from underlying records, and where appropriate, debtors and creditors were properly recorded. |         |     |     |     |           |  |  |  |  |
| 9. Periodic and year-end bank account reconciliations were properly carried out.                                                                                                                                                                                                                                   |         |     |     |     |           |  |  |  |  |

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|--------------------------------------------------------------------------------------------------------------------------------|---------|-----|-----|-----|-----------|--|--|--|--|
|                                                                                                                                |         |     |     |     |           |  |  |  |  |
| Council Members should seek guidance on records to be maintained and returns for self employed staff                           | X       |     |     |     |           |  |  |  |  |
|                                                                                                                                |         |     |     |     |           |  |  |  |  |
|                                                                                                                                |         |     |     |     |           |  |  |  |  |
| Insert text                                                                                                                    |         |     |     |     |           |  |  |  |  |
| 14. Insert risk area                                                                                                           |         |     |     |     |           |  |  |  |  |
| 13. Insert risk area                                                                                                           |         |     |     |     |           |  |  |  |  |
| 12. PAYE and NI requirements                                                                                                   |         |     |     |     |           |  |  |  |  |

\* If the response is 'no', please state the implications and action being taken to address any weakness in control identified (add separate sheets if needed).

\*\* If the response is 'not covered', please state when the most recent internal audit work was done in this area and when it is next planned, or if coverage is not required, internal audit must explain why not.

[My detailed findings and recommendations which I draw to the attention of the Council/Board/Committee are included in my detailed report to the Council/Board/Committee dated .] \* Delete if no report prepared.

**Internal audit confirmation**

I/we confirm that as the Council's internal auditor, I/we have not been involved in a management or administrative role within the body (including preparation of the accounts) or as a member of the body during the financial years 2017-18 and 2018-19. I also confirm that there are no conflicts of interest surrounding my appointment.

Name of person who carried out the internal audit: Brian R G Shepherd

Internal Auditor address: 19A Seymour Avenue, Parc Seymour, Penhryn, Caldicot, NP26 3AG

Signature of person who carried out the internal audit:

Date 26<sup>th</sup> June 2019.