Louisiana Legislative Auditor – Statewide Agreed-Upon Procedures Sample Representation Letter

(Place on Agency Letterhead)

[Date]

[CPA Firm's Name and Address]

In connection with your engagement to apply agreed-upon procedures to certain control and compliance (C/C) areas identified in the Louisiana Legislative Auditor's Statewide Agreed-Upon Procedures (SAUPs), for the fiscal period **July 1, 20xx through June 30, 20xx**, we confirm, to the best of our knowledge and belief, the following representations made to you during your engagement.

1. We acknowledge that we are responsible for the C/C areas identified in the SAUPs, including written policies and procedures; board or finance committee; bank reconciliations; collections; non-payroll disbursements; credit/debit/fuel/purchasing cards; travel and travel-related expense reimbursement; contracts; payroll and personnel; ethics; debt service; and other areas (*should be customized by entity, as applicable*).

Yes 🗆 No 🗆

2. For the fiscal period **July 1, 20xx through June 30, 20xx**, the C/C areas were administered in accordance with the best practices criteria presented in the SAUPs.

Yes 🗆 No 🗆

3. We are responsible for selecting the criteria and procedures and for determining that such criteria and procedures are appropriate for our purposes.

Yes 🗆 No 🗆

4. We have provided you with access to all records that we believe are relevant to the C/C areas and the agreed-upon procedures.

Yes \square No \square

5. We have disclosed to you all known matters contradicting the results of the procedures performed in C/C areas.

Yes \square No \square

6. We have disclosed to you any communications from regulatory agencies, internal auditors, other independent practitioners or consultants, and others affecting the C/C areas, including communications received between **June 30**, **20**xx, and **Date of Practitioner's Report**.

We represent that the listing of bank accounts for the fiscal period that we provided to you 7. is complete. We also represent that we have identified and disclosed to you our main operating account.

8. We represent that the listing of deposit sites for the fiscal period that we provided to you is complete.

- 9. We represent that the listing of collection locations for the fiscal period that we provided to you is complete.
- 10. We represent that the listing of locations that process payments for the fiscal period that we provided to you is complete.

11. We represent that the non-payroll disbursement transaction population for each location that processes payments for the fiscal period that we provided to you is complete.

We represent that the listing of all active credit cards, bank debit cards, fuel cards, and P-12. cards (cards) for the fiscal period, including the card numbers and the names of the persons who maintained possession of the cards, that we provided to you is complete.

13. We represent that the listing of all travel and travel-related expense reimbursements during the fiscal period that we provided to you is complete.

We represent that the listing of all agreements/contracts (or active vendors) for professional 14. services, materials and supplies, leases, and construction activities that were initiated or renewed during the fiscal period that we provided to you is complete.

Yes \Box No \Box

Yes \Box No \Box

Yes 🗆 No 🗆

Yes \Box No \Box

Yes \Box No \Box

Yes \Box No \Box

Yes 🗆 No 🗆

Yes \square No \square

Yes \Box No \Box

18.

15. We represent that the listing of employees/elected officials employed during the fiscal period that we provided to you is complete.

Yes □ No □

16. We represent that the listing of employees/officials that received termination payments during the fiscal period that we provided to you is complete.

Yes 🗆 No 🗆

17. We represent that the employer and employee portions of payroll taxes, retirement contributions, health insurance premiums, and workers' compensation premiums have been paid, and associated forms have been filed, by required deadlines during the fiscal period.

We represent that the listing of bonds/notes issued during the fiscal period that we provided to you is complete.

Yes 🗆 No 🗆

Yes \square No \square

19. We represent that the listing of bonds/notes outstanding at the end of the fiscal period that we provided to you is complete.

Yes □ No □

20. We represent that the listing of misappropriations of public funds and assets during the fiscal period that we provided to you is complete.

Yes 🗆 No 🗆

21. We are not aware of any material misstatements in the C/C areas identified in the SAUPs.

Yes □ No □

22. We have disclosed to you [*list other matters as you have deemed appropriate*].

Yes 🗆 No 🗆

23. We have responded fully to all inquiries made by you during the engagement.

Yes \square No \square

24. We have disclosed to you all known events that have occurred subsequent to **June 30**, **20xx**, that would have a material effect on the C/C areas identified in the SAUPs, or would require adjustment to or modification of the results of the agreed-upon procedures.

Yes \square No \square

The previous responses have been made to the best of our belief and knowledge.

Signature	 Date
Title	
Signature	 Date
Title	