## MILFORD HOUSING AUTHORITY Milford, Massachusetts

### **REPORT ON AGREED-UPON PROCEDURES**

FOR THE YEAR ENDED
MARCH 31, 2019

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# Dooley & Vicars Certified Public Accountants, L.L.P.

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#### INDEPENDENT AUDITOR'S REPORT ON APPLYING AGREED-UPON PROCEDURES

To the Board of Commissioners Milford Housing Authority Milford, 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 Milford Housing Authority, solely to perform the agreed-upon procedures, as prescribed by the Massachusetts Department of Housing and Community Development for the year ended March 31, 2019. The Milford 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 Milford 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 Milford Housing Authority, and is not intended to be and should not be used by anyone other than these specified parties.

Dooley & Vicars

Certified Public Accountants

Tools & Vives

Richmond, Virginia November 27, 2019 Housing Authority: Milford Housing Authority

Fiscal Year End (FYE): 3/31/2019
Date AUP Conducted: 10/29/2019
Executive Director: Ellen Murphy

CPA: Dooley & Vicars CPAS, LLP

CPA Phone: 804 355-2808

A. Rent Collection / Tenant Accounts Receivable / Account Write-Offs				
Number of Category Exceptions: 0 Category Rating: No Findings				
<ul> <li>A. Rent Collection – \( \)  executed.</li> </ul>	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	No Exception Found		
1. Log of ren 2. Post-date 3. Trace amo only one adr 4. Reconcile 5. What is or B. Rent Collection – S 1. Document controls and board or fee C. Rent Collection – 1	Fenant Accounts Receivables (TAR)	NE NE NE NE NE NE NE NO Exception Found NE No Exception Found		
	enant Accounts Receivable is matched to the General Ledger and to the Balance Sheet TAR (51-2).  mple of uncollected TAR accounts (Small - 3, Med - 5, Large - 7, Very Large - 9). Rent Collection is in compliance with LHA rent collection policy (per	NE		
	Financial Assistance (CFA) and Management Plan IIIC).	NE		
	r for Doubtful Accounts is determined in accordance with GAAP and LHA has evaluated estimate on annual basis. Reasonable allowance based on ta. Repayment Agreements reconcile to the Balance Sheet/Operating Statements and are in accordance with DHCD policy.	NE		
D. Account Write-Off	rs – Walk-through uncollected rent that was written-off.	No Exception Found		
	e found, please select N/A option from drop down for both steps 1 and 2.	·		
	tail of write-offs and verify that write-offs are in accordance with DHCD policy.  tation of Board approval to write-off account (board approval of write-off required per budget guidelines for Acct #4570 - Collection Loss).	NE		
2. Document	NE			
Exceptions Noted:	No Exceptions			
Internal Control Recommendation:	No Exceptions			
Authority's Response:	No Exceptions			

Housing Authority: Milford Housing Authority						
B. Payroll/Fringe Benefits						
	Number of Category Exceptions: 0 Category Rating: No Findings					
A. Wage Reconciliati		No Exception Found				
•	<ol> <li>Verify analytically (not to exact amount) that FYE-end wages gross payroll reported on the LHA's General Ledger for all programs and all employees matches actual wage amounts reported on Forms 941 and WR-1 (state and federal filings).</li> </ol>					
analytically ( the LHA's To	HCD-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 p 5 Compensation Form (LHA should have a copy on file). Verify the amount reported on the Top 5 Compensation Form matches <u>exactly</u> the amount reconciled Form 941 and the corresponding state online submission (mass.gov/lwd/unemployment-insur/employers/).	NE				
DHCD and w	possession of DHCD-approved executive contract signed by the LHA, Executive Director and DHCD. If LHA can show that currently being processed by the sax 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, rector and DHCD.	NE				
B. Select a Single Pay		No Exception Found				
	esheets/timecards to the payroll register.	NE				
	ompleteness and accuracy.	NE				
maintains a		NE				
C. Obtain a compens	ated absences liability schedule:	No Exception Found				
Balance She will be accru and; (3) a ca benefits (pai	onsistency with personnel policy (personnel policy required per Contract for Financial Assistance (CFA) and Management Plan Ila2) and reconcile to et (51-2) and General Ledger. If AUP conducted after 9/30/17, personnel policy includes (1) the limits on the amount of vacation and sick leave that ed each year, and when and how such leave will be accrued; (2) a limit on the amount of accrued vacation that may be carried over from year to year, p on the payout for accrued and unused sick leave at the end of employment per PHN 2017-14. Verify analytically future liabilities for employee rticularly GASB 45 and GASB 68) are properly reflected on Operating Statement (51-1) and Balance Sheet (51-2). If GASB 68 actuarial reports were not the LHA in time for year-end financial statements, it is OK for LHA to report last year's GASB 68 numbers.	NE				
2. Proper co	ntrols and approvals are in place, i.e. Executive Director approves employee compensated absences.	NE				
3. Compensa	ated absences should be tracked apart from the timesheets, and verification with timesheets should be performed.	NE				
4. Accrued a	nd Accumulated leave time matches. Time is accruing as it should.	NE				
Exceptions Noted:	No Exceptions					
Internal Control Recommendation:	No Exceptions					
Authority's Response:	No Exceptions					

Housing Authority: Milford Housing Authority					
C. Accounts Payable/Disbursements					
Number of Category Exceptions: 0 Category Rating: No Findings					
A. Select a sample (S	mall - 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 a	and Segregation of Duties	NE			
2. Accuracy		NE			
3. Supporting	g Documentation	NE			
<ol><li>Allowabilit</li></ol>	ry	NE			
<ol><li>Allocation</li></ol>		NE			
6. Classificat		NE			
	nall - 6, Med - 10, Large - 14, Very Large - 18) of credit card/debit card statements.	No Exception Found			
•	enditures can be found, please select N/A option from drop down for <u>all</u> steps 1 to 8.				
	and Segregation of Duties	NE			
2. Accuracy		NE			
	g Documentation (CPAs: include date, description of charge and amount of transaction for each purchase missing documentation below)	NE			
4. Allowabilit	•	NE			
5. Allocation		NE			
6. Classificat		NE			
7. No Sales T		NE			
8. Card is in I	Housing Authority name; not Executive Director (or any other staff member) name.	NE			
D. Select a sample (S	mall - 3, Med - 5, Large - 7, Very Large - 9) of employee reimbursements (include at least one travel reimbursement).	No Exception Found			
1. Approval a	and Segregation of Duties	NE			
2. Accuracy	NE				
3. Supporting	NE				
4. Allowabili	NE				
5. Allocation	NE				
6. Classificat	on	NE			
Exceptions Noted:	No Exceptions				
Internal Control Recommendation:	No Exceptions				
Authority's Response:	No Exceptions				

	Housing Authority: Milford Housing Authority				
D. Inventory (Fixed Assets)					
	Number of Category Exceptions: 0 Category Rating: No Findings				
	he depreciation schedules/fixed asset listing:	No Exception Found			
	listing includes both capitalized and non-capitalized items (such as refrigerators, stoves, community room equipment, office equipment, etc.) of ore. 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 and unabled).	NE			
<ol><li>Depreciat</li></ol>	ion schedule/fixed asset listing includes all relevant assets of \$5,000 or more. It also includes all necessary information to sufficiently identify an ehicles, that includes the make/model/year and for modernization jobs the Fish number.	NE			
3. Items on o	depreciation schedule/fixed asset listing are being accurately depreciated.	NE			
<ol><li>Reconcile detail.</li></ol>	depreciation schedule/fixed asset listing to Form 51-1 (Operating Statement) and General Ledger and evaluate for completeness and sufficiency of	NE			
5. Verify ana	lytically that items listed still exist and are in possession of LHA.	NE			
6. Assets are used for pur	appropriately allocated between Federal and State on General Ledger, Operating Statement (51-1), and depreciated according to which funds were chase.	NE			
3. Capitalization Poli	cy	No Exception Found			
<ol> <li>Verify cap</li> </ol>	italization policy is within state established limits (per Accounting Manual, Sec. 16, p.3).	NE			
C. Vehicles		No Exception Found			
1. Confirm v	ehicles are listed on fixed asset listing, and trace vehicles listing to insurance policies.	NE			
Exceptions Noted:	No Exceptions				
Internal Control Recommendation:	No Exceptions				
Authority's Response:	No Exceptions				

	Housing Authority: Milford Housing Authority	
	E. Procurement/Public Bidding for Goods and Services	
	Number of Category Exceptions: 0 Category Rating: No Findings	
procured. From thes possible when select	mine the cash disbursements journal (or check register) as well as the contract register and identify purchases of goods and services during the year e purchases that should have been competitively procured, select a sample (Small - 3, Med - 5, Large - 7, Very Large - 9) of known or possible procuring 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 appetitively procured, enter as an exception in A. For sampled purchases that went through procurement, follow procedures under B or C below dep	rements valuing \$10,000 or more; if for MGL c. 30B only). If any in the
A. Competitive Procu	rement 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
•	nts 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 ent can be found valuing \$10,000 up to \$35,000, please select N/A option from drop down for <u>each</u> step 1 - 7 below.	Not Applicable
1. (pre 11/7/ requirement	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 s.	N/A
	16) Documentation of solicitation of at least three oral or written quotes/(post 11/7/16) Documentation of a written purchase description with f written quotes from at least three persons.	N/A
	DHCD-approved template or developed by LHA (not a vendor contract).	N/A
	vas for not more than 3 years unless majority board vote allowed it to be longer.  e is documented approving individual contract, or a board vote to delegate authority over certain contracts (by dollar threshold or other criteria) to an	N/A
	mber, usually Executive Director.	N/A
6. Contract d	id not go through automatic renewals unless renewals were part of the original procurement.	N/A
	rement Policy exists (per Accounting Manual Sec. 16, p.2) and is compliant with MGL c. 30B elements mentioned in 1 to 6 above.	N/A
•	nts 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 ralue range, please select N/A option from drop down for each step 1 - 8 below.	Not Applicable
	ection 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 ha	ve a Chief Procurement Officer (CPO) conduct the procurement under c.30B s.6.)	N/A
	16) Documentation of Newspaper advertisement two week prior to bidding process/(post 11/7/16) ion of Newspaper advertisement, LHA's Office and COMMBUYS two weeks prior to bidding process.	N/A
	was for over \$100K, it was advertised in the Goods & Services Bulletin.	N/A
	cract award went to lowest bidder. If RFP, contract went to lowest bidder or letter explaining why went with another bidder.  5 DHCD-approved template or developed by LHA (not a vendor contract).	N/A N/A
	e is documented approving individual contract, or a board vote to delegate authority over certain contracts (by dollar threshold or other criteria) to an	
	mber, usually Executive Director.	N/A
	id not go through automatic renewals unless renewals were part of the original procurement.	N/A
	rement Policy exists (Accounting Manual Sec. 16, p.2) and is compliant with MGL c. 30B elements in 1 to 7 above.	N/A
	he contract register and verify:	No Exception Found
	egister exists and includes all modernization as well as goods and services contracts (per Accounting Manual, Sec. 6, p.12)/PHN 2017-14.	NE
	ontract, it includes the following information: contractor, description, active/inactive, start date, end date, extensions available, contract award	NE
	nge orders amount, contract expenditures to date and remaining value.  or completeness by analyzing the cash disbursements journal against the contract register.	NE
3. Evaluate i	or compressions by unaryong the costs and southern journal against the contract register.	
Exceptions Noted:	No Exceptions	
Internal Control Recommendation:	No Exceptions	
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Authority's

Response:

No Exceptions

Housing Authority: Milford 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
1. Test the m was covered	nonthly bank reconciliation to ensure that the follow earlier).	ving two match:	General Ledger and bank sta	tements (exclude deposits of rent collected as this	NE
	at have been issued and marked on General Ledger econciliation process.	but have not be	en cashed (not on bank state	ement), known as checks in transit are identified as a	NE
B. Bank and Investme	ent Accounts				No Exception Found
1. Verify tha	t banking and investment accounts are properly insi	ured or collatera	lized (per Accounting Manua	ıl Sec. 16, p.7)	NE
Noted:					
Internal Control Recommendation:	No Exceptions				
Authority's Response:	No Exceptions				

	lousing Authority: Milford Housing Authority		
G. Operating Subsidy			
A Obtain same of DI	Number of Category Exceptions: 0 Category Rating: No Findings  CD-approved budget exemptions.		
• •	exemptions, please select N/A option from drop down for step 1 below.	No Exception Found	
	OHCD-approved budget exemptions for direct reimbursement (as found in the ANUEL & Subsidy Worksheet - Section 8) to LHA record of actual		
•	the General Ledger.	NE	
3. Revenue Reconcil	•	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 Led	er to the amounts reported in the ANUEL & Subsidy Worksheet.	NE	
C. Utility Reconciliat		No Exception Found	
	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 t	ne ANUEL & Subsidy Worksheet.		
Exceptions Noted:	No Exceptions		
Internal Control Recommendation:	No Exceptions		
Authority's Response:	No Exceptions		

	Housing Authority: Milford Housing Authority	
	H. Annual Rent Calculation and Compliance	
	Number of Category Exceptions: 0 Category Rating: No Findings	
_	h 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 n lected 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 ro	ill and HAP roll:	No Exception Found
1. Verify ana	llytically 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 Ann	ual Rent Calculation	No Exception Found
	eliness 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 (	Calculation	No Exception Found
	calculation for proper verification of income, expenses and deductions.	NE
	nily composition for allowance purposes.	NE
	tation of income, exclusions from income, and deductions.	NE
	ffications Regarding Rent Changes	No Exception Found
	ification of rent redetermination sent at least 60 days prior to effective date (see 760 CMR 6.04 (4)(b)).	NE
	tice of Rent Change sent no less than 14 days prior to effective date (see 760 CMR 6.04 (4)(e)).	NE
	eliness and proper execution of Lease Addendum (see 760 CMR 6.06 (5)(q)).  tion (starting with AUPs conducted after 7/31/17)	NE No Exception Found
	has Certificate of Fitness (COF).	NE Exception Found
	has Letter of Compliance for Lead Paint if child <6 years old and building built prior to 1978 with no new construction permit.	NE NE
	has Proof of Ownership which is either 1. Deed/Online Printout from Registry of Deeds or 2. Proof of Insurance or 3. Tax Documents.	NE NE
4. MRVP file		NE NE
Exceptions Noted:	No Exceptions	
Internal Control Recommendation:	No Exceptions	
Authority's Response:	No Exceptions	