



# Oregon Secretary of State – Audits Division

## Summary of Revenues and Expenditures

Please refer to instructions on next page.

A. Municipal corporation information	
Municipality name: _____	Reporting period: From _____
Address line 1: _____	To _____
Address line 2: _____	Report type: _____
City, state, ZIP: _____	Opinion issued: _____
Check if new address: <input type="checkbox"/>	Basis of accounting: _____
<b>If this is the final report</b> , please enter the last date of operations: _____	

B. Financial statement audit – Reported deficiencies	
1. Regarding internal controls over financial reporting, how many significant deficiencies and material weaknesses were reported? _____	3. How were deficiencies communicated? Check all that apply. <input type="checkbox"/> Report issued in accordance with Government Auditing Standards <input type="checkbox"/> Communication in accordance with Statements on Auditing Standards AU-C 265 "Communicating Internal Control Related Matters Identified in an Audit" <input type="checkbox"/> Other (specify communication): _____ <input type="checkbox"/> No deficiencies Per OAR 162-010-0230, a copy must be filed with Secretary of State.
2. Of those control deficiencies reported, how many resulted in the following: Accounting errors/Misstatements: _____ Noncompliance: _____	

C. Summary of revenues and expenditures	
Revenues and/or receipts	Expenditures and/or disbursements
a. Revenues from government-wide statement of activities:	a. Expenditures from government-wide statement of activities:
b. Fiduciary fund additions:	b. Fiduciary fund deductions:
<b>c. Gross revenues subtotal (a + b):</b>	<b>c. Gross expenditures subtotal (a + b):</b>
d. Revenues of component units:	d. Component unit expenditures reported with primary government:
e. Taxes, assessments and other collections to be distributed to other governments:	e. Turnovers to other municipal corporations:
<b>f. Exempt revenue subtotal (d + e):</b>	<b>f. Exempt expenditures subtotal (d + e):</b>
<b>g. Net revenues (c – f):</b>	<b>g. Net expenditures (c – f):</b>

<b>D. Filing fee:</b> _____
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E. Submitted by	
Auditor name: _____	Municipal license number: _____
Firm name: _____	Date: _____
Municipal contact name, title: _____	Municipal phone: _____

**Submit:** Click the "Submit" button on the right to submit this form via email. Save a copy for your records.

Within 30 days of delivering the audit report to the municipal corporation, one copy of this summary must be filed with the Secretary of State, Audits Division, and one copy must be delivered to the municipal corporation. If deficiencies are communicated in a separate letter or in a report issued in accordance with *Government Auditing Standards*, a copy of that communication must also be filed. (OAR 162-010-0230)

# Instructions

## Section A: Municipal corporation information

Type information or use drop-down menu to complete this section. Indicate new address by checking the box.

- **Report type:** Select Audit or Review
- **Opinion issued:** Select from unmodified, qualified, adverse, or disclaimer. If any opinion unit received other than unmodified, please identify that opinion type.
- **Basis of accounting:** Identify whether GAAP, cash, or modified cash basis statements are presented.

## Section B: Financial statement audit – Reported deficiencies

### B.1. How many significant deficiencies and material weaknesses were communicated?

Include the total number of *material weaknesses* and *significant deficiencies* reported in accordance with AU-C 265, ORS 297.466, and OAR 162-010-0230. Do not count “other matters” communicated.

If none were reported, insert a zero.

### B.2. Of those control deficiencies reported, how many resulted in accounting errors/misstatements or noncompliance?

Most deficiencies relate to internal controls over financial reporting. Some control deficiencies might also directly result in accounting errors and misstatements or non-compliance. If any of the findings communicated resulted in accounting errors and misstatements or noncompliance, indicate the number of deficiencies included in the total for B.1 that also pertain to those categories.

### B.3. How were deficiencies communicated?

Select the format used to communicate deficiencies to those charged with governance. Check all that apply. If no material weaknesses or significant deficiencies were communicated select No Deficiencies.

*NOTE: If deficiencies are communicated (including other matters), the auditor shall file a copy of the communication with the Secretary of State within 30 days of delivering the report to the municipal corporation. (OAR 162-010-0230)*

## Section C: Summary of revenues and expenditures

Revenues/receipts and expenditures/disbursements information is derived from amounts reported for government-wide and fiduciary activities and on the basis of accounting used in the audited or reviewed financial statements.

## Section D: Filing fee

The filing fee is based on net expenditures; section C, line g. Enter the fee based on the chart below:

Net expenditures over	Net expenditures do not exceed	Fee
\$ 0	\$ 50,000	\$ 20
\$ 50,000	\$ 150,000	\$ 40
\$ 150,000	\$ 500,000	\$ 150
\$ 500,000	\$ 1,000,000	\$ 200
\$ 1,000,000	\$ 5,000,000	\$ 250
\$ 5,000,000	\$ 10,000,000	\$ 300
\$ 10,000,000	\$ 50,000,000	\$ 350
\$ 50,000,000		\$ 400

### ORS 297.485(1):

#### Net expenditures and/or disbursements

The filing fee shall be determined by the total **expenditures** made by the municipal corporation for any and all purposes during the calendar or fiscal year audited, except that **expenditures** for principal of bonded debt, principal of short-term loans, principal of warrants redeemed which were issued during prior audit periods, transfers or loans between funds and turnovers of taxes or other trust moneys to other municipal corporations shall not be included in the **total expenditures** upon which the amount of the fee is based.

## Section E: Submitted by

Include the name of the licensed municipal auditor who performed the engagement and is submitting this form. Also include their title, firm name, and date this summary form was completed.

**To submit:** • Click the “Submit” button on page one to submit this form via email

• Save and email the completed form to [municipalfilings.sos@oregon.gov](mailto:municipalfilings.sos@oregon.gov) or

• Print a hardcopy and mail to: Audits Division, 255 Capitol St NE, Ste 500, Salem, Oregon 97310-0720