

**FAMILY CRISIS CENTER, INC.**

**AGREED-UPON PROCEDURES REPORT  
State of West Virginia  
Department of Health and Human Resources  
Accountability and Reporting Requirements**

**Fiscal Year Ending  
June 30, 2013**

DHHR - Finance

DEC 2 2016

Date Received

**Fike, Conner & Associates, P.A.**  
*Certified Public Accountants*

# Fike, Conner & Associates, P.A.

Certified Public Accountants

113 NATIONAL HIGHWAY, LAVALE, MARYLAND 21502

PHONE (301) 777-9383 FAX (301) 777-3923

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

Board of Directors and Management  
Family Crisis Center, Inc.  
P.O. Box 207  
Keyser, WV 26726

We have performed the procedures listed in the attached supplement for the fiscal year ending June 30, 2013, which were agreed to by the management of Family Crisis Center, Inc., solely to assist Family Crisis Center, Inc. with the accountability and reporting requirements of the State of West Virginia Department of Health and Human Resources pursuant to West Virginia Code Section 12-4-14. Family Crisis Center, Inc.'s management is responsible for compliance with the State of West Virginia Department of Health and Human Resources' accountability and reporting requirements. 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 in the attached supplement either for the purpose for which this report has been requested or for any other purpose.

We were not engaged to, and did not, conduct an examination, the objective of which would be the expression of an opinion on Family Crisis Center Inc.'s compliance with the State of West Virginia Department of Health and Human Resources' accountability and reporting requirements. 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 management and the board of directors of Family Crisis Center, Inc., and is not intended to be, and should not be, used by anyone other than these specified parties.

*Fike, Conner and Associates, P.A.*

LaValc, Maryland  
November 22, 2016

DHHR - Finance

DEC 2 2016

Date Received

**FAMILY CRISIS CENTER, INC.**  
**SUPPLEMENT TO THE AGREED-UPON PROCEDURES REPORT**

**Agreed-Upon Procedures are as follows:**

Source:

State of West Virginia Department of Health and Human Resources (DHHR)

DHHR Grantee Audit Compliance Guide

Attachment E - Supplemental Compliance Procedures for an Agreed-Upon Procedures Engagement

1. Review the grant agreement and any related documents (e.g. statements of work, budgets, change orders, program directives, regulations, etc.) to ascertain the purpose for which the funds were awarded and the terms and conditions associated with the state grant.

**We obtained the grant agreement between the West Virginia Department of Health and Human Resources (Bureau for Children and Families) and the Family Crisis Center, Inc. We reviewed the grant agreement along with the grantee budget and other terms and conditions of the grant to ascertain the purpose for which the funds were awarded. The grant agreement is for the provision of protective services for victims of domestic violence and their families as further described in Exhibit A.**

2. Verify whether funds received under the grant (as reported on the sworn statement of expenditures) were correctly authorized, recorded, and deposited into the appropriate organizational accounts.

**We verified that the funds awarded by the grant as reported on the "Sworn Statement of Grant Receipts and Expenditures" agreed to the deposit records and accounting records of the Family Crisis Center and were properly authorized.**

3. Review all costs (as listed on the sworn statement of expenditures) and related transactions associated with the grant to verify whether:
  - a. Costs were approved by the DHHR, if required.

**There were no costs noted that needed approved by the DHHR.**

- b. Costs conform to the allowability of costs provisions or limitations in the program agreement, program regulations, or program statute.

**We reviewed all costs charged to the grant/program for allowability of the cost provisions and did not note any unallowable costs during our review.**

- c. Costs represent charges for actual costs, not budgeted or projected amounts.

**We reviewed all costs charged to the grant/program and ascertained that they were all actual costs and that none of the costs were budgeted or projected amounts.**

**FAMILY CRISIS CENTER, INC.**  
**SUPPLEMENT TO THE AGREED-UPON PROCEDURES REPORT**

- d. Costs are given consistent treatment within and between accounting periods. Consistency in accounting requires that costs incurred for the same purpose, in like circumstances, be treated as either direct costs only or indirect costs only with respect to final cost objectives.

**We verified that the costs were given consistent treatment within and between accounting periods. During our test of the costs charged to the grant/program, we did not note any costs that were from another accounting period. All costs charged to the grant/program were treated as direct costs.**

- e. Costs are net of all applicable credits (e.g. volume or cash discounts, insurance recoveries, refunds, rebates, trade-ins, adjustments for checks not cashed, and scrap sales).

**During our test of the costs charged to the grant/program, we did not note any costs that were not net of all applicable credits.**

- f. Costs are not included as both a direct billing and as a component of indirect costs.

**There were only direct costs charged to the grant/program, and no indirect costs were charged. Family Crisis Center did not treat any costs as indirect costs and no indirect cost rates were applied to the grant.**

- g. Costs are supported by appropriate documentation (e.g. approved purchase orders, receiving reports, vendor invoices, canceled checks, and time and attendance records) and correctly charged as to account, amount and period.

**The Family Crisis Center (Center) uses an outside certified public accounting (CPA) firm to process payroll and to help with all accounting functions. The Center forwards all payroll related information to the CPA firm to process the payroll and forwards all unpaid invoices with an approval for payment sheet to the CPA firm to cut all checks for vendors. The CPA firm uses QuickBooks to complete all the accounting functions. We reviewed the accounting records from the QuickBooks program, agreed the expenditures from the accounting system to the "Sworn Statement of Expenditures," and tested all expenditures charged to the DHHR grant. Our test of expenditures charged to the grant consisted of reviewing the original invoice documentation along with the approval for payment sheet, canceled checks, payroll earnings reports and employee time sheets. The Center had substantially all the original invoice documentation along with an approval for payment sheet for all expenditures charged to the grant. The approval for payment sheet attached to the original invoice documentation shows the grant program to be charged and approval for payment by an authorized signature (executive director). We were not given the July 2012 and June 2013 bank statements to be able to do a cancelled check review for most of the July 2012 and June 2013 expenditures by check. We did review the canceled checks for the remaining eleven months. We reconciled the total salaries and wages expense line in QuickBooks with the payroll earnings records and payroll**



**FAMILY CRISIS CENTER, INC.**  
**SUPPLEMENT TO THE AGREED-UPON PROCEDURES REPORT**

- g. Costs are supported by appropriate documentation (e.g. approved purchase orders, receiving reports, vendor invoices, canceled checks, and time and attendance records) and correctly charged as to account, amount and period. - Continued

reports. We also reviewed the salaries and wages charged to the grant with the payroll earnings reports and related employee timesheets. It was noticed that some employee timesheets were missing but overall the timesheets were substantially complete.

4. Inquire and report upon the status of any findings, contingencies, or other deficiencies discovered during the current engagement or described in any prior agreed-upon procedures report (if applicable) that could negatively affect administration of the DHHR grant and related program/project.
- 1) Audited financial statements were completed for the fiscal year ending June 30, 2012. This is the first agreed-upon procedures engagement for the Family Crisis Center for the fiscal year ending June 30, 2013.
  - 2) We were not presented with the July 2012 and June 2013 bank statements that were needed to review the cancelled checks. We also noticed two checks only had one signature instead of the required two signatures. We recommend that the Center maintain all bank statements along with canceled checks in their files.
  - 3) Original invoice documentation for thirty five (35) expenditures charged to the grant were not present. We recommend that the Center maintain all original invoice documentation for expenditures charged to the grant.
  - 4) There were some missing employee time sheets from our tests of salaries and wages charged to the grant. We recommend that the Center obtain and maintain timesheets from all personnel that charge time to the grant.





## West Virginia Department of Health & Human Resources Sworn Statement of Grant Receipts and Expenditures

(Please see the Instructions for Completion of the Sworn Statement of Grant Receipts and Expenditures located in the Grantee Audit Compliance Guide as Attachment D)

<b>Grant Number:</b> G130292		<b>Grantee Name:</b> Family Crisi Center, Inc.	
<b>Grantee FEIN:</b> 311042103	<b>WVFIMS Vendor #:</b> 29228	<b>Contact Phone Number:</b> (304) 788-6061	
<b>Grantee Mailing Address:</b> P.O. Box 207, Keyser, WV 26726			
<b>Total Grant Amount:</b> \$257.66		<b>Period Covered:</b> FY 12-13	

Grant Receipts				
Invoice Number	Invoice Period Covered	Invoice Amount	Date Received	Amount Received
13029220121	July - Sep 2012	\$51,731.00	11/08/12	\$51,731.00
23029220122	October - December 2012	\$56,904.00	11/21/12	56,904.00
33029220123	January - March 2013	\$64,664.00	02/12/13	64,664.00
43029220124	April - June 2013	\$85,357.00	05/30/13	84,357.00
<b>Total Grant Receipts</b>				<b>\$257,656.00</b>

Grant Expenditures		
Expenditures	Description/Examples	Amount Expended
Personnel	<i>Salaries and Wages</i>	\$147,103.07
Fringe Benefits		\$44,356.00
Equipment and Other Capital Expenditures		
Materials and Supplies	<i>Office Supplies, Postage, Training</i>	\$22,958.38
Professional Service Costs	<i>Contracts, Consultants</i>	\$8,400.75
Rental Costs	<i>Office Space, Equipment</i>	\$11,400.00
Other	<i>Telephone, Utilities</i>	\$23,437.80
Subgrants		
Indirect Cost		
<b>Total Grant Expenditures</b>		<b>\$257,656.00</b>

**Ending Funds Balance (Receipts – Expenditures)**

*This is to certify that I have reviewed the Statement of Grant Receipts and Expenditures submitted herewith and, to the best of my knowledge and belief, said statement represents all financial activities related to the receipt, use and expenditure of funds granted by the State of West Virginia, Department of Health and Human Resources to Family Crisi Center, Inc. and that the expenditures reported were for the purposes intended and in compliance with the applicable laws, regulations and terms and conditions of the grant documents. The Statement of Grant Receipts and Expenditures is presented on the (Circle One) Cash/Accrual basis of accounting and is supported by our financial records and related documentation.*

**Authorized Signature:** Allan T. LaRue **Date:** 6-22-15

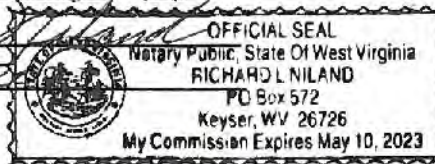
**Printed Name and Title:** Allan T. LaRue, President of the Board of Directors

Taken, sworn and subscribed before me this 22<sup>nd</sup> day of JUNE, 2015.

**Notary Public Signature:** Richard L. Niland

**My Commission Expires:** 10 MAY 2023

**JUN 25 2015**  
Revised 03/09



Date Received

