NAVARRO COUNTY, TEXAS SINGLE AUDIT REPORT SEPTEMBER 30, 2022

SINGLE AUDIT REPORT

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Navarro County Courthouse

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INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

Honorable Judge and Members of the Commissioners' Court Navarro County, Texas

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the governmental activities, each major fund, and the aggregate remaining fund information of Navarro County, Texas ("the County"), as of and for the year ended September 30, 2022 and the related notes to the financial statements, which collectively comprise the County's basic financial statements, and have issued our report thereon dated June 29, 2023.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the County's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the County's internal control. Accordingly, we do not express an opinion on the effectiveness of the County's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that have not been identified. We did identify certain deficiencies in internal control, described in the accompanying Schedule of Findings and Questioned Costs as items 2022-001 and 2022-002 that we considered to be material weaknesses.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the County's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under Government Auditing Standards.



The County's Response to Findings

Patillo, Brown & Hill, L.L.P.

The County's response to the findings identified in our audit are described in the accompanying schedule of findings and questioned costs. The County's responses were not subjected to the auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on them.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Waco, Texas June 29, 2023

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INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM AND REPORT ON INTERNAL CONTROL OVER COMPLIANCE IN ACCORDANCE WITH THE UNIFORM GUIDANCE

Honorable Judge and Members of the Commissioners' Court Navarro County, Texas

Report on Compliance for Each Major Federal Program

Opinion on Each Major Federal Program

We have audited Navarro County, Texas' ("the County"), compliance with the types of compliance requirements described in the U.S. Office of Management and Budget (OMB) Compliance Supplement that could have a direct and material effect on each of the County's major federal programs for the year ended September 30, 2022 The County's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, the County, complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended September 30, 2022.

Basis for Opinion on Each Major Federal Programs

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in Government Auditing Standards issued by the Comptroller General of the United States (*Government Auditing Standards*); the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of the County and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal and state programs. Our audit does not provide a legal determination of the County's compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules and provisions of contracts or grant agreements applicable to the County's federal programs.



Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the County's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards* and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material, if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about the County's compliance with the requirements of each major federal and state programs as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards* and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the County's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of the County's internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of the County's internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Report on Internal Control Over Compliance

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance

Patillo, Brown & Hill, L.L.P.

We have audited the financial statements of the governmental activities, each major fund, and the aggregate remaining fund information of Navarro County, Texas, as of and for the year ended September 30, 2022, and the related notes to the financial statements, which collectively comprise Navarro County, Texas' basic financial statements. We issued our report thereon dated June 29, 2023, which contained an unmodified opinion on those financial statements. Our audit was conducted for the purpose of forming an opinion on those financial statements. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated in all material respects in relation to the basic financial statements as a whole.

Waco, Texas June 29, 2023

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

FOR THE YEAR ENDED SEPTEMBER 30, 2022

	Federal		
Federal Grantor/Pass-through Grantor/ Program Title	Assistance Listing <u>Number</u>	Pass-through Entity Identifying Number	Federal Expenditures
U. S. Department of Justice			
Direct Programs:			
Equitable Sharing Program	16.922	TX1750000	<u>\$ 36,610</u>
Total Direct Programs			36,610
Total U. S. Department of Justice			36,610
U. S. Department of Treasury Direct Program:			
Equitable Sharing Program	21.016	TX1750000	434,926
Total Direct Programs	21.010	1/1/30000	434,926
Passed through Texas Division of Emergency Management:			
COVID-19 - Coronavirus State and Local Fiscal Recovery Funds	21.027	VA 3968501	409,275
Total Passed through Texas Division of Emergency Management:			409,275
Total U. S. Department of Treasury			844,201
U. S. Office of National Drug Control Policy			
Direct Programs: High Intensity Drug Trafficking Area (HIDTA)	95.001	G20NT0001A	419,514
High Intensity Drug Trafficking Area (HIDTA)	95.001	G21NT0001A	2,996,258
High Intensity Drug Trafficking Area (HIDTA)	95.001	G22NT0001A	1,047,715
Total 95.001			4,463,487
Total Direct Programs			4,463,487
Total U. S. Office of National Drug Control Policy			4,463,487
Total Expenditures of Federal Awards			\$ <u>5,344,298</u>

NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

SEPTEMBER 30, 2022

1. GENERAL

The accompanying Schedule of Expenditures of Federal Awards presents the activity of all federal financial assistance programs of Navarro County, Texas, for the year ended September 30, 2022. The County's reporting entity is defined in Note 1 to the County's financial statements. Federal financial assistance received directly from federal agencies and other agencies are included in the Schedule of Expenditures of Federal Awards.

2. BASIS OF ACCOUNTING

The accompanying Schedule of Expenditures of Federal Awards is presented using the modified accrual basis of accounting, which is described in Note 1 to the County's financial statements.

3. PASS-THROUGH EXPENDITURES

None of the federal programs expended by the County were provided to subrecipients.

4. INDIRECT COSTS

The County has elected not to use the 10% de minimis indirect cost rate as allowed in the Uniform Guidance.

5. RECONCILIATION OF HIDTA FEDERAL REVENUES AND THE AMOUNT OF PROGRAM EXPENDITURES ON THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

The following is the reconciliation of HIDTA federal revenues and the HIDTA expenditures reported on the Schedule of Expenditures of Federal Awards for the fiscal year:

Intergovernmental revenue - HIDTA Fund on the Statement of Revenues, Expenditures and Changes in Fund Balance of Governmental Funds	\$	4,710,232
HIDTA program income	<u>(</u>	246,745)
HIDTA program federal expenditures on the Schedule of Expenditures of Federal Awards	\$	4,463,487

SCHEDULE OF FINDINGS AND QUESTIONED COSTS

FOR THE YEAR ENDED SEPTEMBER 30, 2022

Summary of Auditors' Results

Financial Statements:

Type of auditors' report issued Unmodified

Internal control over financial reporting:

Material weakness(es) identified? Items 2022-001 and 2022-002

Significant deficiency(ies) identified?

None reported

Noncompliance material to financial statements

noted? None

Federal Awards:

Internal control over major programs:

Material weakness(es) identified? None

Significant deficiency(ies) identified?

None reported

Type of auditors' report issued on compliance

for major federal programs Unmodified

Any audit findings disclosed that are required to be reported in accordance with 2 CFR

200.516(a) of Uniform Guidance? None reported

Identification of major federal programs:

Federal Assistance Listing Number: Name of Federal Program:

95.001 High Intensity Drug Trafficking Areas Program

Dollar threshold used to distinguish between type A

and type B federal programs \$750,000

Auditee qualified as low-risk auditee for

federal single audit?

Findings and Questioned Costs for Federal Awards

None

SCHEDULE OF FINDINGS AND QUESTIONED COSTS (Continued)
FOR THE YEAR ENDED SEPTEMBER 30, 2022

<u>Findings Relating to the Financial Statements Which are Required to be Reported in Accordance</u> with Generally Accepted Government Auditing Standards

Bank Reconciliations

<u>Criteria</u>: Bank reconciliations should be performed for every cash account in order to prepare accurate financial statements. Reconciling cash to the

general ledger is an important step in preventing material errors or

fraud.

Item 2022-001 (Recurring):

<u>Cause</u>: During our audit, we noted the County was reconciling its bank

accounts to the general ledger, but adjustments were recorded to the

general ledger accounts subsequent to the reconciliation.

<u>Effect</u>: The transactions are posted to cash general ledger.

Cause: Certain transactions are posted to cash general ledger accounts after

the bank reconciliation is performed.

Recommendation: All bank accounts should be reconciled to the general ledger on a

timely basis, and then adjustments to those accounts should be

prohibited.

Management's Response: The County is in the process of implementing controls to ensure

adjustments are not posted to cash subsequent to the reconciliation of

bank accounts to the general ledger.

Item 2022-002 (Recurring): Due to/from Other Funds

<u>Criteria</u>: All interfund balances should be reconciled to detect errors both

intentional and unintentional.

<u>Condition</u>: The County's interfund balances were not reconciled to the general

ledger.

<u>Cause</u>: Internal controls to ensure interfund balances are reconciled properly

were not implemented.

Effect: The lack of controls creates an environment in which errors could go

undetected within a timely manner.

Recommendation: Interfund balances should be reconciled to the general ledger and

reviewed on a monthly basis.

<u>Management's Response</u>: In the future, management will reconcile interfund balances monthly.



NAVARRO COUNTY AUDITOR'S OFFICE

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Natalie Robinson, First Assistant Kaye Martin, Assistant Patty Wells, Assistant Lisa Clay, Assistant Jane Wise, Administrative Asst.

Terri L. Gillen County Auditor

Phone: (903) 654-3095 Fax: (903) 654-3097

NAVARRO COUNTY, TEXAS

SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS

FOR THE YEAR ENDED SEPTEMBER 30, 2022

Findings Relating to the Financial Statements Which Are Required to be Reported in Accordance with Generally Accepted Government Auditing Standards

Item 2021-001 (Recurring): Bank Reconciliations

<u>Current Status:</u> Partially corrected. See current year finding 2022-001. The

County continues to develop and implement stronger monthly reconciliation procedures between the County Auditor's Office and the County Treasurer's Office. However, Corrective action has been slowed by continued delays to yearly close and audit preparation resulting from the COVID-19 pandemic, management of the related grant funding, and implementation

of new accounting standards.

Item 2021-002 (Recurring): Due to/from Other Funds

<u>Current Status</u>: Partially corrected. See current year finding 2022-002. The

County continues to develop and implement stronger monthly reconciliation procedures between the County Auditor's Office and the County Treasurer's Office. However, Corrective action has been slowed by continued delays to yearly close and audit preparation resulting from the COVID-19 pandemic, management of the related grant funding, and implementation

of new accounting standards.



NAVARRO COUNTY AUDITOR'S OFFICE

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Kaye Martin, Assistant Patty Wells, Assistant Lisa Clay, Assistant Jane Wise, Administrative Asst.

Natalie Robinson, First Assistant

Terri L. Gillen

Item 2022-001 (Recurring):

Phone: (903) 654-3095 **County Auditor** Fax: (903) 654-3097

CORRECTIVE ACTION PLAN FOR THE YEAR ENDED SEPTEMBER 30, 2022

Bank Reconciliations

Criteria: Bank reconciliations should be performed for every cash account in

order to prepare accurate financial statements. Reconciling cash to the general ledger is an important step in preventing material errors or

fraud.

Condition: During our audit, we noted the County was reconciling its bank

> accounts to the general ledger, but adjustments were recorded to the general ledger accounts subsequent to the procedure was performed.

Certain transactions are posted to cash general ledger accounts after Cause:

the bank reconciliation is performed.

Effect: The transactions are posted to cash general ledger.

All bank accounts should be reconciled to the general ledger on a Recommendation:

timely basis, and then adjustments to those accounts should be

prohibited.

PERSON RESPONSIBLE FOR CORRECTION ACTION: Ryan Douglas, County Treasurer

CORRECTIVE ACTION PLANNED: The County is in the process of implementing controls to ensure adjustments are not posted to cash subsequent to the reconciliation of bank accounts to the general ledger.

ANTICIPATED COMPLETION DATE: September 30, 2023

Item 2022-002 (Recurring): **Due to/from Other Funds**

All interfund balances should be reconciled to detect errors both Criteria:

intentional and unintentional.

Condition: The County's interfund balances were not reconciled to the general

ledger.

Cause: Internal controls to ensure interfund balances are reconciled properly

were not implemented.

Effect: The lack of controls creates an environment in which errors could go

undetected within a timely manner.

Recommendation: Interfund balances should be reconciled to the general ledger and

reviewed on a monthly basis.

PERSON RESPONSIBLE FOR CORRECTION ACTION: Terri Gillen, County Auditor

CORRECTIVE ACTION PLANNED: In the future, management will reconcile interfund balances

monthly.

ANTICIPATED COMPLETION DATE: September 30, 2023