

BRIEF TITLE	APPROVAL DEADLINE	REASON

DETAILS **POSITIONS/RECOMMENDATIONS**

<p>This set of ordinances creates a six-member City Audit Advisory Board to assist the City in conducting/managing financial audits, internal audits, operational reviews, and performance audits of City offices, departments, agencies, and certain other governmental organizations. The purpose of these audits, which would be conducted by independent contract auditors, is to review (1) the performance, efficiency, and effectiveness of any or all offices, departments, agencies, and other governmental organizations in which the City has a role, (2) the adequacy of management and financial accounting systems and controls, and (3) the accuracy of management and financial records, statements, and reports within the jurisdiction of the City Council and/or Mayor. The attached flowchart outlines the process by which these audits would be requested, contracted for, and performed.</p>	Sponsor	Mayor's Office
	Program Departments, or Groups Affected	
	Applicants/Proponents	Applicant: City Department: Other
<p>Discussion (Including Relationship to other Council Actions)</p>	Opponents	Groups or Individuals Basis of Opposition
	Staff Recommend.	<input type="checkbox"/> For <input type="checkbox"/> Against Reason Against
	Board or Commission Recommend.	BY <input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No Action Taken <input type="checkbox"/> For with revisions or conditions (See Details column for conditions)

DETAILS

POLICY/PROGRAM IMPACT

	POLICY OR PROGRAM CHANGE	<input type="checkbox"/> NO <input type="checkbox"/> YES _____ _____ _____
	OPERATIONAL IMPACT ASSESSMENT	_____ _____ _____ _____
	FINANCES	
	COST AND REVENUE PROJECTIONS	COST of total project: \$ _____
		COST of this Ordinance/ Resolution \$ _____
		RELATED annual operating Costs \$ _____
		INCREASE REVENUE EXPECTED/YEAR \$ _____
	SOURCE OF FUNDS	CITY [Approximately]
		\$ _____ %
		- \$ _____ %
- \$ _____ %		
-		
NON CITY [Approximately]		
\$ _____ %		
- \$ _____ %		
- \$ _____ %		
-		
BENEFIT COST		
<input type="checkbox"/> Front Foot Assessment	Average	
<input type="checkbox"/> Square Foot	\$ _____ \$ _____	

APPLICABLE DATES:

FACT SHEET PREPARED BY:
Denise Pearce, Mayor's Office

REVIEW BY:

REFERENCE NUMBER