ANNUAL AUDIT PLAN QUESTIONNAIRE

- 1) What do you consider the top three activities or functions within your department? Please list.
- 2) What are your department's top three revenue sources?
- 3) What are your department's top three expenditure types, excluding payroll?
- 4) Are any activities in your department regulated by local, state, or federal guidelines, including reporting requirements (e.g., granting agencies, TABC, DEA, EPA)? Yes/No. If yes, please list.
- 5) Have any activities in your department been audited by an outside firm, or reviewed by a consultant, within the past two years? Yes/No. If yes, please explain.
- 6) Does your department have written standardized operating procedures that are made available to staff? Yes/No
- 7) Has your department had any significant organizational changes and/or employee turnover within the past two years? Yes/No
- 8) Has your department implemented any new technology within the past three years? Yes/No. If yes, please list.
- 9) Is your department planning to implement new technology/software within the next two years? Yes/No. If yes, please list.
- 10) Has your department implemented any new programs during the past two years? Yes/No. If yes, please list.
- 11) Are you aware of any activity or areas of risk, in your department, that could benefit from an internal audit? Yes/No. If yes, please list and/or explain.
- 12) Are there any processes or system interfaces at the City of Corpus Christi that you feel negatively impact your department operations (e.g., results in inefficiencies)? Yes/No. If yes, please explain.
- 13) Has your department experienced any known fraud or abuse over the past three years? Yes/No. If yes, please explain.
- 14) Please feelfree to share any additional comments, questions, or concerns.