

Annual Financial Statement Electronic Submission U.S. Department of Housing and Urban Development Real Estate Assessment Center (REAC)	
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Project Name	FHA/Contract Number	Date From	Date To
Consolidated Statement		01/01/2004	12/31/2004
EIGHT LANE COOP 1	080TC881	01/01/2004	12/31/2004
EIGHT LANE COOP 2	080TC882	01/01/2004	12/31/2004

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Submission Warning

Auditor Procedures

Independent Accountant's Report on Applying Agreed-Upon Procedure

We have performed the procedure described in the second paragraph of this report, which was agreed to by _____ and the U.S. Department of Housing and Urban Development, Real Estate Assessment Center (REAC), solely to assist them in determining whether the electronic submission of certain information agrees with the related hard copy documents.

_____ is responsible for the accuracy and completeness of the electronic submission. This agreed-upon procedure engagement was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants and generally accepted government auditing standards. The sufficiency of the procedure is solely the responsibility of those parties specified in this report. Consequently, we make no representation regarding the sufficiency of the procedure described below either for the purpose for which this report has been requested or for any other purpose.

We compared the electronic submission of the items listed in the "UFRS Rule Information" column with the corresponding printed documents listed in the "Hard Copy Documents" column. The results of the performance of our agreed-upon procedure indicate agreement or non-agreement of the electronically submitted information and hard copy documents as shown in the chart below.

We were engaged to perform an audit of the financial statements of _____ as of and for the year ended 12/31/2004 and have issued our reports thereon dated _____. The information in the "Hard Copy Documents" column was included within the scope or was a by-product of that audit. Further, our opinion on the fair presentation of the supplemental financial data templates dated _____, was expressed in relation to the basic financial statements of _____ taken as a whole.

A copy of the financial statement package, which includes the auditor's reports, is available in its entirety from _____. We have not performed any additional auditing procedures since the date of the aforementioned audit reports. Further, we take no responsibility for the security of the information transmitted electronically to the U.S. Department of Housing and Urban Development, REAC.

This report is intended solely for the information and use of _____ and the U.S. Department of Housing and Urban Development, REAC, and is not intended to be and should not be used by anyone other than these

specified parties.

PROCEDURE	UFRS RULE INFORMATION	HARD COPY DOCUMENTS	AGREES	DOES NOT AGREE
1	Balance Sheet, Revenue and Expense and Cash Flow data (account numbers 1120 to 7100T and the S1200 series)	Financial Data Templates (i.e Supplemental Schedules)	<input type="radio"/>	<input type="radio"/>
2	Surplus Cash (S1300 series accounts) Note: Because Cooperatives are exempt from submitting surplus cash accounts, please select "Agrees".	Financial Data Templates (i.e. Computation of Surplus Cash, Distributions and Residual Receipts - (Annual))	<input type="radio"/>	<input type="radio"/>
3	Footnotes(S3100 series of accounts)	Footnotes to Audited Basic Financial Statements	<input type="radio"/>	<input type="radio"/>
4	Type of opinion on the Financial Statement and Compliance (account number S2100-020, S2300-020)	Auditor's Reports on the Financial Statements and Compliance	<input type="radio"/>	<input type="radio"/>
5	Type of opinion on Financial Data Templates (i.e. Supplemental Data) (account S2100-100)	Auditor's Supplemental Report on Financial Data Templates	<input type="radio"/>	<input type="radio"/>
6	Audit findings narrative (S2700 series of accounts)	Schedule of Findings and Questioned Costs	<input type="radio"/>	<input type="radio"/>

Firm Name First M. Last, CPA

Employer Identification Number 123456789

Date 01/01/2005

Attesting Practitioner's First Name *

Attesting Practitioner's Middle Name _____

Attesting Practitioner's Last Name *

Attesting Practitioner's Title _____

Attesting Practitioner's Telephone *

Attesting Practitioner's Fax _____

Attesting Practitioner's E-mail _____

Complete Certification Procedures

*** Required items**

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