



Promoting Accountability of Public Resources

AUDITOR GENERAL'S REPORT

**On The Compliance Audit of the Liberia
Petroleum Regulatory Authority (LPRA)**

**For the Period July 1, 2018 through
December 31, 2023**

December 2025

**P. Garswa Jackson Sr. FCCA, CFIP, CFC
Auditor General, R.L.**



Table of Contents

Adverse Conclusion	7
1 DETAILED FINDINGS AND RECOMMENDATIONS	14
1.1 Governance.....	14
1.1.1 Lack of Functional Board of Directors.....	14
1.1.2 No Monitoring & Evaluation.....	15
1.1.3 No Strategic and Operational Plan	16
1.1.4 Lack of Senior Management Meeting Minutes	17
1.1.5 No Annual Report	18
1.1.6 Lack of Audit Committee.....	20
1.1.7 No Training and Development Plan.....	21
1.2 Budget Management.....	22
1.2.1 No Evidence of a Functional Budget Committee	22
1.2.2 No Evidence of a Budget Unit.....	23
1.2.3 No Evidence of Internal Budget.....	24
1.2.4 No Evidence of Quarterly and Annual Budget Performance Reports	25
1.2.5 No Approved Financial Manual	26
1.2.6 No Automated Financial Management System/ Accounting Software	27
1.2.7 Non-Preparation and Submission of Financial Statements	28
1.3 Personnel Management	30
1.3.1 No Salary Scale/Structure	30
1.3.2 Non-Competitive Recruitment	31
1.3.3 No Employees Performance Appraisal	32
1.3.4 Staff Maintained on Payroll beyond Contracted Period	34
1.3.5 No Automated Payroll Management System	35
1.3.6 Lack of Segregation of Duties in Payroll Management.....	36
1.3.7 Non-Remittance of Social Security's Contributions.....	38
1.3.8 Non-Monitoring of Attendance Log	40
1.3.9 Non-Performance of Exit Conference for Resignation.....	42
1.4 Cash Management	42
1.4.1 Unapproved Monthly Bank Reconciliation Statements	42

1.4.2	Irregularities Associated with Petty Cash.....	43
1.4.3	Misapplication of Overdraft Facility	45
1.5	Procurement Management	47
1.5.1	Irregularities Associated with Procurement Management.....	47
1.5.2	Irregularities in the Awarding of Reconnaissance License.....	49
1.6	Expenditure Management.....	51
1.6.1	Payment Vouchers without Evidence of Adequate Supporting Documents.....	51
1.6.2	Expenditures without Payment Vouchers and Supporting Documents	52
1.6.3	Third-Party Payments made to Employees of the Entity.....	53
1.6.4	No Job Completion Certificates.....	55
1.6.5	Irregularities associated with Travel Expenditures.....	56
1.6.6	Non-Withholding and Remittance of GST	58
1.6.7	No Fuel Consumption Policy	59
1.7	Fixed Assets Management	60
1.7.1	Irregularities Associated with Fixed Assets Management.....	60
1.8	Revenue Management	62
1.8.1	Irregularities Associated with Internally Generated Revenue	62
1.9	Receivables Management	64
1.9.1	Irregularities Associated with Account Receivables Management.....	64
1.10	Payable Management	67
1.10.1	Irregularities Associated Payable Management	67
1.11	Assurance Management.....	69
1.11.1	No Evidence of Approved Internal Audit Charter	69
1.11.2	No Evidence of Internal Audit Plan and Reports.....	70
	ANNEXURE 3: Irregularities associated with Fixed Assets Management	80
	Annexure 5: Irregularities Associated with Payable Management.....	88

Acronyms/Abbreviations/Symbols

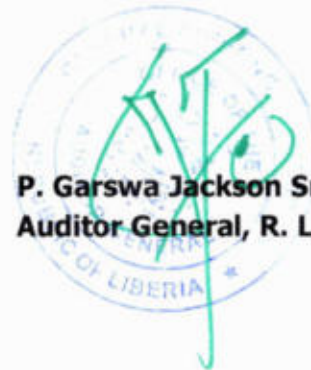
Acronyms/Abbreviations/Symbol	Meaning
AG	Auditor General
IBLL	International Bank Liberia Limited
BEP	Bid Evaluation Penal
CBL	Central Bank of Liberia
CFC	Certified Financial Consultant
CFIP	Certified Forensic Investigation Professional
DG	Director General
DDGA	Deputy Director General for Administration
FCCA	Fellow Member of the Association of Chartered Certified Accountants
GAC	General Auditing Commission
GoL	Government of Liberia
IFRS	International Financial Reporting Standards
LPRA	Liberia Petroleum Regulatory Authority
LPRA	Liberia Revenue Authority
M & E	Monitoring and Evaluation
NOCAL	National Oil Company of Liberia
PFM Act	Public Finance Management Act
PFMU	Project Financial Management Unit
PPC Act	Public Procurement & Concessions Act
PPCC	Public Procurement and Concessions Commission
PV	Payment Voucher
US\$	United States Dollar

TRANSMITTAL LETTER

**THE HONORABLE SPEAKER OF THE HOUSE OF REPRESENTATIVES AND THE HONOURABLE
PRESIDENT PRO- TEMPORE OF THE LIBERIAN SENATE**

We have undertaken a Compliance Audit of the Liberia Petroleum Regulatory Authority (LPRA) for the Periods July 1, 2018 through December 31, 2023. The audit was conducted in line with Section 2.1.3 of the General Auditing Commission (GAC) Act of 2014.

Finding conveyed in this report were formally communicated to the authorities of the LPRA for their responses. The reportable issues were submitted through a Management Letter. Where responses were provided, they were evaluated and were incorporated in this report. Given the significance of the matters raised in this report, we urge the Honourable Speaker and Members of the House of Representatives and the Honourable Pro- Tempore and Members of the Liberia Senate to consider the implementation of the recommendations conveyed in this report with urgency.



**P. Garswa Jackson Sr. FCCA, CFIP, CFC
Auditor General, R. L.**

Monrovia, Liberia
March 2026

March 12, 2026

Hon. Marilyn T. Logan
Director General
Liberia Petroleum Regulatory Authority
18th Street
Monrovia, Liberia

Auditor General's Report on the Compliance Audit of the Liberia Petroleum Regulatory Authority (LPRRA) for the Period I July 2018 to 31 December 2023

Adverse Conclusion

The General Auditing Commission has concluded a Compliance Audit of the financial transactions and operations of the LPRRA. The audit has been conducted in compliance with relevant laws and regulations consistent with the Auditor General's mandate as provided for in Section 2.1.3 of the General Auditing Commission (GAC) Act of 2014 as well as in accordance with the Public Financial Management (PFM) and Regulations of 2009.

Based on the audit work performed, because of the significance of the non-compliance matters noted in the Basis for Conclusion paragraphs below, the subject matter is not in all material respect, in compliance with the Revenue Code of Liberia Act of 2011, Public Financial Management Act 2009 Amended and Restated (2019) and its Regulations, Public Procurement and Concession Act of 2005, Amended and Restated 2010 and its Regulations, Civil Service Standing Order, Decent Work Act of 2015, Committee of Sponsoring Organizations of the Treadway Commission (COSO), and LPRRA Policies.

Basis for Adverse Conclusion

We identified multiple issues of significant materiality that affect the financial transactions and operations of the LPRRA. These issues are categorized as follows:

1.1 Non-Preparation and Submission of Financial Statements

- Management did not prepare and submit financial statements as adopted by the Government of Liberia for the period July 2018 to December 2023.

1.2 Salary Structure/ Paygrade

- No approved salary structure instituted at the entity for supplementary personnel.
- Salaries and positions of several supplementary personnel were not consistent with the GOL harmonized salary structure/paygrade.
- There were disparities within supplementary staff's salaries. Several staffs within the same positions and performing similar roles and responsibilities were paid different salaries.

1.3 Non- Competitive recruitment

- Management did not facilitate competitive recruitment in accordance with Section 2.9 of the Decent Work Act of 2015 for the ten (10) personnel hired during the periods under audit.

1.4 Appraisals and Promotions

- Management did not conduct performance evaluation of its employees for the fiscal periods under audit as required.

1.5 Separation and Turnover

- Management did not comprehensively document adjustments (joiners, leavers, promotions, demotions, suspensions, etc.) on a periodic basis for the periods under audit.

1.6 Internal Control Related to the Supplementary Payroll System of LPRA

- No approved Human Resource Policy and Procedures to guide the human resource activities at the entity. Management did not adopt the Decent Work Act of 2015 to guide its human resources activities.
- LPRA Job Description Policy Document which outlines the job description of various positions at the entity was not finalized, approved and operationalized during the periods.
- No training and development plan for the entity's staffs.
- Lack of segregation of duties in payroll management; no evidence that monthly payroll originated from the Human Resource Unit and forwarded to the Finance Unit for processing. Further, there is no evidence that the payroll journals were subsequently submitted to heads of department/units to review and corroborate salaries to be disbursed to personnel of their department/units prior to the payment of salaries.

1.7 Irregularities in the Awarding of Reconnaissance License

- LPRA Management granted Canadian Global Energy (CGE) Liberia, a Reconnaissance License (No. LPRA-002) for US\$500,000.00, to conduct geotechnical surveys and evaluations in Blocks LB26, LB30, and LB31 in the Harper Basin. The license was granted contrary to the advice and recommendations of the Technical Committee that was setup to review the technical and financial proposals submitted by bidders. The following reasons were provided for the non-provision of Reconnaissance License to CGE by Deloitte & Touche Project Monroe II Due Diligence Report dated April 21, 2023.
- Canadian Global Energy Corp's operations in Namibia were clouded by contradictory information, and the company did not submit critical information necessary for stakeholders to evaluate their operations. As per the Petroleum Law of Liberia, Canadian Global Energy Corp was in complete violation of section 15.4. It was recommended that

CGE provides transparent information on their establishment in Namibia, submit audited accounts and financial reports, and prove their technical capability, and fulfill their environmental obligations. CGE failed to comply with these recommendations and could lead to reputational damage and jeopardize their operations in Liberia.

1.8 Payment Vouchers without Evidence of Adequate Supporting Documents

- There was no evidence of adequate supporting documents, such as invoices, delivery notes, business registration, tax clearance certificate etc., for various expenditures amounting to US\$85,360.40 and L\$1,903,398.00.

1.9 Expenditures without Payment Vouchers and Supporting Documents

- Sample of transactions selected from the bank statements amounting to US\$61,790.00 and L\$4,840,226.14 were not supported by payment vouchers and other relevant supporting documents.

1.10 Third-Party Payments made to Employees of the Entity

- Management made several payments amounting to US\$19,660 and L\$209,500, to employees of the entity rather than to the service providers or their legally authorized representatives.

1.11 No Job Completion Certificates

- Management authorized payments for services amounting to US\$103,990 against two service contracts without any evidence of service performed.
- Additionally, there was no evidence of certificate of completion or partial completion of services. Furthermore, these payments were made to entities that did not provide evidence of Business Registration and Tax Clearance certificates. Procurement processes applied were not supported by documentary evidence and the locations of the businesses could not be physically verified.

1.12 Irregularities associated with Travel Expenditures

- Travel expenditures, and Incidental allowances amounting to US \$18,296.00 were not duly retired/accounted for; there were no receipts for air tickets purchased; total numbers of days designated for travel and applicable rates and allowances were not supported by documentary evidence; the processes involved in procuring tickets were not competitive; no evidence of travel activities reports for some travel expenditures.

1.13 Monthly Bank Unapproved Reconciliation Statements

- Monthly bank reconciliation statements prepared by the Finance Consultant from July 2018 to December 2018 were not reviewed and approved as required.

1.14 Fixed Assets Management

- There was no evidence of a fixed assets management policy; fixed assets register did not contain all the relevant columns; fixed assets register was not regularly updated; there was no evidence of periodic physical verification of assets by Management and no evidence of movement of assets form. Some fixed assets of the entity were not coded.

These above issues have a pervasive impact on the LPRA's compliance with the relevant laws, regulations, or standards, causing material non-compliance and raising concerns about the entity's adherence to the required compliance framework.

**P. Garswa Jackson, Sr. FCCA, CFIP, CFC
Auditor General, R.L.**

Monrovia, Liberia
March 2026

Background

The Compliance Audit Report of the Liberia Petroleum Regulatory Authority (LPRA) was commissioned by the Auditor General of the Republic of Liberia (R.L) under his statutory authority as provided for under Section 2.1.3 of the GAC Act of 2014.

The Liberia Petroleum Regulatory Authority was created by an Act of the National Legislature in 2014 (amended in 2019).

Functions and Responsibilities of the MOS

The Liberia Petroleum Regulatory Authority is charged with, among other things, the responsibility to provide for the establishment of a fiscal and legal regulatory framework for the management and regulation of petroleum activities in accordance with Articles 7 and 22(b) of the Constitution of the Republic of Liberia and for related matters.

Key Management Personnel

The following key personnel managed the affairs of the Liberia Petroleum Regulatory Authority (LPRA) during the fiscal periods under audit:

No.	Name	Rank	Tenue
	Edward Smith	Director General	January 2018 to September 2018
1	Archie N. Donmo	Director General	October 2018 to December 2023
2	Matthew D. Jallah	Deputy Director General for Administration	March 2018 to December 2023
3	Rufus M. Tarnue	Deputy Director General for Technical Services	March 2018 to present
	David B. Dahn	Deputy Director General for Operations	March 2018 to December 2023
	Fabian M. Lai	Finance Consultant	January 2018 to March 2019
4	Fabian M. Lai	Chief Financial Officer	April 2018 to September 2022
5	Korkulo S. Nyanquoi	Controller	September 2022 to Present
6	Doreen McGee	Human Resources Manager	April 2019 to present

Audit Objectives:

- To provide the intended user(s) with information on whether the LPRA follows legislative decisions, laws, legislative acts, policies, established codes, and agreed upon terms;
- To gather sufficient and appropriate evidence whether the LPRA operations with special emphasis on Budget Management, Personnel Management, Cash Management, Procurement Management, Fixed Assets Management, Inventory Management, Revenue/ Income Management, Receivables Management, Payable Management, Assurance Management and Governance are in all material respect, in compliance with relevant legislative decisions, laws, legislative acts, policies, established codes and agreed upon terms.

- To report in terms of the GAC reporting requirements as spelt out in part four (4) of the GAC Act of 2014, the findings and conclusion to the National Legislature.

Audit Criteria

The audit criteria for the subject matter were the Revenue Code of Liberia Act of 2011, Public Financial Management Act 2009 and its Regulation, Amendment and Restatement of the PFM Act 2009 (2019), Public Procurement and Concession Act of 2005, Amended and Restated 2010 and its Regulations, Civil Service Standing Order, Decent Work Act – 2015, Committee of Sponsoring Organizations of the Treadway Commission (COSO), the National Social Security Corporation Regulation of 2018, and LPRA Policies.

Subject Matter and Scope

Compliance Audit on the financial transactions and operations of the LPRA for the fiscal periods July 1, 2018 through December 31, 2023

The Compliance Audit covers the current system and processes in place at the LPRA focuses on, but not limited, to the following areas:

- Recruitment and placement;
- Salary structure/pay grade;
- Appraisals and promotions;
- Separation and turnover;
- Personnel's existence;
- Personnel Records and Documentation
- Internal Control Systems related to the Supplementary Payroll System of LPRA
- Accounting and Financial administration
- Procurement
- Revenue and Payable
- Fixed asset management
- Internal Audit function

Audit Methodology

This audit was based on document analyses and interviews, and meetings with the key staffs of the LPRA. In the process of information gathering, we had several meetings with staffs, assessed the entity's risk assessment documents for the periods under review. We have further assessed transactional documents, reports, and policy documents which are appropriate for our conclusion. The audit was conducted in accordance with ISSAI 4000 INTOSAI's Standards for Compliance Audit.

Limitation of Responsibility

The audit involves performing procedures to obtain audit evidence about the subject matters' compliance with applicable authorities identified as criteria. The procedures selected depend on the auditor's professional judgment, including the assessment of the risks of material non-compliance of the subject matter, whether due to fraud or error.

*Auditor General's Report on the Compliance Audit of the
Liberia Petroleum Regulatory Authority (LPRRA)
For the Period July 1, 2018 through December 31, 2023*

Because of the inherent limitations of an audit, together with the inherent limitations of internal control, there is an unavoidable risk that some material non-compliance may not be detected, even though the audit is properly planned and performed in accordance with the ISSAIs. In making our risk assessments, we considered internal control relevant to the subject matter, but not for the purpose of concluding on the effectiveness of the entity's internal control.

1 DETAILED FINDINGS AND RECOMMENDATIONS

1.1 Governance

1.1.1 Lack of Functional Board of Directors

Criteria

- 1.1.1.1 Section 7.6 of the Liberia Petroleum Law 2016, as Amended in 2019 states that "General policy oversight and direction shall be provided to the Authority by a Board consisting of five (5) Liberians including the Chairperson appointed by the President. They shall be persons of high integrity, shall have qualification and experience in geoscience, engineering, management, law or taxation and finance relevant to the responsibilities of the Authority and shall not otherwise be an officer in the public service. They shall serve at will and pleasure of the President. The Director General, who shall be Ex officio, shall serve as Secretary to the Board of Directors. In addition to its responsibility for general policy oversight and direction, the Board shall have the specific responsibilities set forth elsewhere in this Act and shall also have responsibility for (a) establishing programs for the long-term development of the Authority's capacity; (b) approving the annual budget and staffing levels of the Authority; and (c) establishing policies and goals for the obtaining of external funding and approving the integration of any such funding into the agency's budget and expenditure programs.
- 1.1.1.2 In carrying out its general policy oversight and direction responsibilities, the Board shall consult on a regular basis with the Minister of Lands Mines and Energy, the Minister of Finance and Development Planning, and the Executive Director of the Environmental Protection Agency."

Observation

- 1.1.1.3 During the audit, we observed the following irregularities associated with the Board of Directors of the entity:
- The membership of the board was adjusted from two members to the new requirement of five members as enshrined in the Amended 2019 Petroleum Law. However, the additional three (3) members were not appointed to the board as required.
 - Additionally, the Chairman of the board, Dr. Fodee Kromah, resigned from the LPRA's Board in March 2020, thus leaving Cllr. Idella Cooper as the sole Board Member for FY 2020/2021 to FY 2023. Upon the then Chairman's resignation, we observed no evidence of a functional board as per the 2019 Amended Petroleum Law.

Risk

- 1.1.1.4 The strategic oversight over the function of Management may be impaired. This may impair the achievement of the institution's objectives.

1.1.1.5 Management may override institutional policies and procedures that may adversely impact the operations of the entity.

1.1.1.6 Management may not implement internal and external audit recommendations due to the absence of a functional audit committee.

Recommendation

1.1.1.7 Management should liaise with the appropriate authorities to establish a functional board of directors.

1.1.1.8 The Board of Directors should be made functional evidenced by periodic meetings' minutes and activities reports. Evidence of periodic meeting minutes and activities reports should be adequately documented and filed to facilitate future review.

Management's Response

1.1.1.9 *While this is noted, it is directly in the purview of the office of the President of Liberia, who has the statutory responsibility to appoint members of the Board of Directors at the LPRA.*

Auditor General's Position

1.1.1.10 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.1.2 No Monitoring & Evaluation

Criteria

1.1.2.1 Regulation A.15 (1) of the PFM Act of 2009 as amended and restated 2019 states that "a head of government agency must exercise all reasonable care to prevent and detect unauthorized, irregular, fruitless, and wasteful expenditure, and must for this purpose implement clearly defined business processes, identify risk associated with these processes and institute effective internal controls to mitigate these risks.

Observation

1.1.2.2 During the audit, we observed from FY 2018 to FY 2023, no evidence of a functional Monitoring and Evaluation Committee (M&E) to provide the required oversight for the full implementation of planned activities within approved timelines, evidenced by the absence of approved annual monitoring & evaluation plans and periodic activities reports.

Risk

1.1.2.3 In the absence of effective monitoring and evaluation, project deliverables may not be achieved up to approved specifications and within approved timelines.

- 1.1.2.4 Value for money may not be achieved and project resources may be subjected to misapplication and misappropriation.

Recommendation

- 1.1.2.5 Management should facilitate the establishment of a functional Monitoring and Evaluation Committee (M&E), evidenced by the documentation of planned annual activities and periodic activities reports. Evidence of approved annual plans and periodic activities reports should be adequately documented and filed to facilitate future review

Management's Response

- 1.1.2.6 *No Response*

Auditor General's Position

- 1.1.2.7 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.1.3 No Strategic and Operational Plan

Criteria

- 1.1.3.1 Regulation D.19 (1)(b) of the PFM Act of 2009 as amended and restated 2019 entitled 'Expenditure Estimates' states that a head of a government entity shall "prepare a strategic plan which shall include a definition of the Government agency's mission, goals, objectives, outputs and activities;
- 1.1.3.2 Regulation D.22 entitled 'Budget Hearing' further states that: (1) "On receipt of estimates from ministries and agencies, the Minister shall cause to be conducted budget hearings to review strategic plans and estimates of the government agencies concerned in order to ensure that these plans and estimates are in accordance with the Government's macroeconomic policy and fiscal framework. (2) Where necessary, the Minister may require a government ministry or agency to make adjustments to its strategic plans and estimates in order to fulfill the requirements of the Government's macro-economic policy and fiscal framework."

Observation

- 1.1.3.3 During the audit, we observed that for the period FY 2018 to FY 2023, Management operated the entity without evidence of approved strategic and operational plans for the period under audit.

Risk

- 1.1.3.4 Short, medium and long-term goals of the entity may not be identified, pursued and implemented thereby impairing the achievement of the organization objectives.

- 1.1.3.5 Failure to develop policies and procedures to guide the activities of the entity may lead to arbitrary decisions that may be non-compliant to applicable laws and regulations and may impair the achievement of the entity's objectives.

Recommendation

- 1.1.3.6 Management should develop, approve and operationalize a strategic plan (for at least five years) cataloging short, medium and long-term goals, resources and strategies needed to achieve those goals and timelines for the implementation of goals cataloged therein. Subsequently, Management should develop, approve and operationalize annual operational plans to expedite the implementation of strategic goals on an annual basis.
- 1.1.3.7 The strategic and operational plans should be monitored and assessed on a periodic basis. Adjustments should be implemented where applicable.
- 1.1.3.8 Evidence of approved strategic and operational plans should be adequately documented and filed to facilitate future review.

Management's Response

- 1.1.3.9 *No Response*

Auditor General's Position

- 1.1.3.10 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.1.4 Lack of Senior Management Meeting Minutes

Criteria

- 1.1.4.1 Regulation A.3 (1) of the PFM Act of 2009 as amended and restated 2019 states that, "Any public officer concerned with the conduct of financial matters of the Government of Liberia, or the receipt, custody and disbursement of public and trust moneys, or for the custody, care and use of government stores and inventories shall keep books of accounts and proper records of all transactions and shall produce the books of accounts and records of the transactions for inspection when called upon to do so by the Auditor-General, the Comptroller General, the relevant internal auditor or any officers authorized by them, by the Minister."

Observation

- 1.1.4.2 During the audit, we observed that, except for July 19, 2022, there was no evidence of Senior Management meeting minutes indicating oversight and review of Management functions.

Risk

- 1.1.4.3 Monitoring and evaluation of the mandate and strategic and operational objectives of the entity may be impaired. This may impair the achievement of approved deliverables of the entity.

Recommendation

- 1.1.4.4 Management should facilitate the conduct of periodic Senior Management meetings. Senior Management meeting minutes should comprehensively detail activities discussed, actions to implement planned activities and approved timelines. Meetings' minutes should be subsequently documented and filed to facilitate future review.
- 1.1.4.5 Management should also institute a platform for following-up on decision made at Senior Management meetings. An update of progress towards previous meeting agreed actions/deliverable should be discussed during current meetings, as a medium for tracking institutional progress and planning for future activities.

Management's Response

- 1.1.4.6 *We have evidence of meeting minutes. The responsibility for compiling and circulating these minutes was assigned to the former Deputy Director General for Administration.*

Auditor General's Position

- 1.1.4.7 Management's assertions were not supported by documentary evidence. Therefore, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.1.5 No Annual Report

Criteria

- 1.1.5.1 Regulation M.11 of the PFM Act of 2009 as amended and restated in 2019 states that: the board of directors of an enterprise shall, within two months after the expiry of each financial year to which the financial statements relate, submit an annual report to the Minister, the Sector Minister, the Auditor General and the Bureau of State Enterprises dealing generally with the activities and operations of the enterprise within that year.
- 1.1.5.2 (2) The annual report shall include:
- a) a copy of the audited accounts of the enterprise;
 - b) a statement of any directions given by the Sector Minister to the Board or Bureau of State Enterprise within that year in accordance with this Act and the enactment under which the enterprise exists; and
 - c) such other information as the Sector Minister may in writing reasonably request.

- 1.1.5.3 (3) A copy of the annual report of the Board of Directors of an enterprise shall also be sent by the Board to the head of the Liberia Institute of Statistics and Geographical Information Systems; the Governor of the Central Bank of Liberia; and any other person that the Minister may determine.
- 1.1.5.4 (4) The Auditor General shall review the annual report and present his/her opinion to the Legislature alongside the audit report of government financial operations for the previous year.
- 1.1.5.5 (5) The Minister shall present a statement of the overall performance of State Owned Enterprises to the Legislature alongside the budget proposals for the following year.

Observation

- 1.1.5.6 During the audit, we observed no evidence of annual reports prepared by Management for the period under review.

Risk

- 1.1.5.7 Significant activities, achievement, challenges and measures to mitigate challenges may not be adequately documented. This may impair institutional performance measurement and the development of remediation strategy to address existing challenges and constraints.
- 1.1.5.8 Information to facilitate institutional memory, expedite learning curves and provision of current administrative and operational status of the entity may not be available.

Recommendation

- 1.1.5.9 Management should facilitate the preparation and approval of administrative and operational activities reports on an annual basis. The reports should cover the proposed goals for the fiscal year, achievement against those goals, significant activities and challenges and measures to mitigate challenges in the near future. The report should also contain the entity audited financial statements (or at least a management account) to adequately inform stakeholders about the annual financial activities of the entity.
- 1.1.5.10 The report should be approved by the head of the entity and subsequently submitted to the Board of Directors, and the Offices of the Auditor General, the Comptroller and Accountant General and the sector minister (where applicable). Evidence of approved annual administrative and operational activities reports should be adequately documented and filed to facilitate future review.

Management's Response

- 1.1.5.11 *The Department of Technical Services, under my leadership, fulfilled its obligation by submitting comprehensive annual reports detailing our activities for the period under review.*

Auditor General's Position

- 1.1.5.12 Management's assertion did not adequately address the issues raised. The single report submitted by Management in response to our audit query was a technical evaluation report on the Evaluation and Recommendation Regarding Reconnaissance License Granted to Canadian Global Energy Liberia. This report was not an annual report of the entity as asserted by Management. Therefore, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.1.6 Lack of Audit Committee

Criteria

- 1.1.6.1 Regulation K.10 of the PFM Act of 2009 as amended and restated 2019 states that "the head of government agency or government organization shall in consultation with the internal audit governance board establish and maintain an audit committee for the government agency or organization for which he/she is responsible."
- 1.1.6.2 Further, Regulation K.11(1), (a) of the PFM Act of 2009 as amended and restated 2019 states that the Audit Committee of Government Agencies or Organizations shall review internal controls, including the scope of internal audit, internal audit Plans, internal audit findings, and recommend to the head of government agency the appropriate action to be taken.

Observation

- 1.1.6.3 During the audit, we observed that for FY 2018 to 2023, no evidence that Management established an audit committee to monitor and address audit matters at the institution as required.

Risk

- 1.1.6.4 Audit issues and lapses identified in the entity's internal control system may not be appropriately monitored and addressed due to the lack of audit committee.
- 1.1.6.5 Internal and external audit recommendations may not be monitored and implemented in a timely manner.

Recommendation

- 1.1.6.6 Management should liaise with the relevant authority to establish a functional audit committee. Evidence of periodic meetings minutes and activities reports should be adequately documented and filed to facilitate future review.

Management's Response

- 1.1.6.7 *No response*

Auditor General's Position

- 1.1.6.8 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.1.7 No Training and Development Plan

Criteria

- 1.1.7.1 The Committee of Sponsoring Organizations of the Treadway Commission (COSO) states, that "commitment to competence includes the level of knowledge and skill needed to help ensure orderly, ethical, economical, efficient and effective performance, as well as a good understanding of individual responsibilities with respect to internal control".
- 1.1.7.2 The above can be evidenced by providing training, to raise the awareness of management and employees of the internal control objectives and, in particular, the objective of ethical operations, and helps them to understand the internal control objectives and to develop skills to handle ethical dilemmas.

Observation

- 1.1.7.3 During the audit, we observed no evidence that Management had a documented training and development plan for staff of the entity.

Risk

- 1.1.7.4 Lack of training and development plans may result in training programs not being able to address employees' training needs and performance deficiencies.
- 1.1.7.5 In the absence of an annual training plan, training may be conducted arbitrarily. This may impair the development plan and the required capacity of staff of the entity.
- 1.1.7.6 In the absence of periodic training/capacity-building initiatives, staff may not obtain the required capacity needed to achieve the objectives of the entity.

Recommendation

- 1.1.7.7 Management should develop, approve, and operationalize a comprehensive training plan that addresses the strategic capacity needs of the staff of the entity. The requisite training and capacity development plan for each unit should be identified and scheduled.
- 1.1.7.8 Management should facilitate the execution of the training and development plan consistent with the approved schedule, monitor output from training for adjustments to future annual training and development plans.

- 1.1.7.9 Evidence of annual capacity development plan should be adequately documented and filed to facilitate future review.

Management's Response

- 1.1.7.10 *A Training & Development Plan for the period under review was indeed developed and submitted by the Technical Services Department, under my supervision.*

Auditor General's Position

- 1.1.7.11 Management's assertions were not supported by documentary evidence. Therefore, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.2 Budget Management

1.2.1 No Evidence of a Functional Budget Committee

Criteria

- 1.2.1.1 Regulation D.16.1 of the PFM Act of 2009 as amended and restated 2019 states that "Every head of government agency shall establish a Budget Committee which shall be responsible for budget formulation, implementation, monitoring and evaluation made up of (a) the head of government agency, who shall be the chairperson; and (b) Heads of budget management centers or cost centers)".

Observation

- 1.2.1.2 During the audit, we observed no evidence of a functional budget committee.

Risk

- 1.2.1.3 In the absence of a functional budget committee, effective monitoring and evaluation of revenue and expenditure may be impaired. This may lead to under receipt of budgeted revenue and / or over expenditure.

- 1.2.1.4 Periodic Budget Performance Reports may not be prepared adequately or in a timely manner.

- 1.2.1.5 Management may be non-compliant with Regulation D.16.1 of the PFM Act of 2009 as amended and restated 2019.

Recommendation

- 1.2.1.6 Management should facilitate the establishment of a functional Budget Committee, evidenced by the documentation of attendance records, meeting minutes, and periodic activities reports. Evidence of attendance records, meeting minutes, and periodic activities reports should be adequately documented and filed to facilitate future review.

Management's Response

1.2.1.7 *No response*

Auditor General's Position

1.2.1.8 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.2.2 No Evidence of a Budget Unit

Criteria

1.2.2.1 Regulations A.1 of the PFM Act of 2009 as amended and restated 2019 states that "the public shall be provided with full access to all appropriate information concerning the financial affairs of the Government. This will include, but not limited to, information about the development of annual and supplementary budget estimates, the quarterly fiscal outturn reports issued by the Ministry, the monthly revenue and quarterly budget performance reports of ministries and agencies state owned enterprises their annual accounts and reports and the Government's annual audited accounts".

Observation

1.2.2.2 During the audit, we observed no evidence that Management established a functional Budget Unit or employed a Budget Officer to record actual revenue collection and expenditure disbursement in a timely manner, for the period under audit.

Risk

1.2.2.3 In the absence of a Budget Officer/ Budget Unit, actual revenue and expenditure may not be recorded in a timely manner. This may impair budget monitoring and evaluation, which may lead to under receipt of budgeted revenue and / or over expenditure.

Recommendation

1.2.2.4 Management should facilitate the immediate establishment of a Budget Unit, competitively hire qualified and experienced budget officers/ accountants to manage the activities of the unit.

1.2.2.5 The Budget Unit upon establishment should facilitate real time recording of actual revenue and expenditure and prepare periodic (quarterly and annual) budget performance reports for onward submission to the relevant authorities as required. Evidence of periodic budget performance reports should be adequately documented and filed to facilitate future review.

Management's Response

1.2.2.6 *The Finance Department handled the budget functions in consultations with Executive and therefore could not create another unit or employ another staff due to budgetary constraint.*

Auditor General's Position

- 1.2.2.7 We acknowledge Management's assertion that "The Finance Department handled the budget functions in consultations with Executive and therefore could not create another unit or employ another staff due to budgetary constraint." However, Management should ensure that at least a staff in the Finance Department is responsible for facilitating real time recording of revenue receipts and expenditure disbursements, and compilation of periodic budget performance reports for subsequent review by the head of Finance. Therefore, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.2.3 No Evidence of Internal Budget

Criteria

- 1.2.3.1 Regulation O.1.1&2 of the PFM Act of 2009 as restated in 2019 states "(1) All government agencies shall provide in their annual budgetary estimates, their expected revenue collections and internally generated funds. (2) A head of government agency is personally responsible for ensuring that adequate safeguards exist and are applied for the assessment, collection of and accounting for such revenues and other public moneys relating to their agencies, departments or office".

Observation

- 1.2.3.2 During the audit, we observed that for FY 2018 to FY 2023, no evidence of an annual budget comprehensively cataloging all projected sources of revenue and planned expenditures for the period under review.

Risk

- 1.2.3.3 The completeness and accuracy of revenue and expenditures may not be assured. This may lead to subsequent misstatement of financial statements.
- 1.2.3.4 Management may not fully account for activities/assets of the entity.
- 1.2.3.5 Management may not pursue and collect all projected revenue. Unplanned approved projected expenditures may facilitate misapplication and misappropriation of public funds.

Recommendation

- 1.2.3.6 Management should facilitate the preparation of annual budgets comprehensively cataloging all projected sources of revenue of the entity and planned expenditures. The annual budget should be subsequently approved by the relevant authority LPRA's Board.
- 1.2.3.7 Evidence of approved annual budgets should be adequately documented and filed to facilitate future review.

Management's Response

- 1.2.3.8 *Internal Budgets were prepared and submitted periodically; approved by the Board and Senior Management.*

Auditor General's Position

- 1.2.3.9 Management's assertions were not supported by documentary evidence. Therefore, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.2.4 No Evidence of Quarterly and Annual Budget Performance Reports

Criteria

- 1.2.4.1 Regulations A.1 of the PFM Act of 2009 as amended and restated 2019 states that "the public shall be provided with full access to all appropriate information concerning the financial affairs of the Government. This will include, but not limited to, information about the development of annual and supplementary budget estimates, the quarterly fiscal outturn reports issued by the Ministry, the monthly revenue and quarterly budget performance reports of ministries and agencies, state owned enterprises their annual accounts and reports and the Government's annual audited accounts".

Observation

- 1.2.4.2 During the audit, we observed, except for FY 2020/2021, no evidence of quarterly and annual budget performance reports comprehensively cataloging all projected sources of revenue and planned expenditures for the period under review.

Risk

- 1.2.4.3 In the absence of Quarterly and Annual Budget Performance Reports, revenue and expenditure may not be reliably measured. This may lead to under receipt of budgeted revenue and / or over expenditure.

Recommendation

- 1.2.4.4 Management should facilitate timely preparation of Quarterly and Annual Budget Performance Reports in line with the PFM Act of 2009.
- 1.2.4.5 Evidence of Quarterly and Annual Budget Performance Reports should be adequately documented and filed to facilitate future review.

Management's Response

- 1.2.4.6 *While this is noted for an immediate compliance; there is evidence that Quarterly and Annual Budget reports were done between 2022 & 2023.*

Auditor General's Position

- 1.2.4.7 We acknowledge Management's subsequent submission of revenue and expenditure analysis for the periods under audit after our audit execution. However, the reports submitted were not a representation of a comprehensive quarterly and annual budget performance reports. A comprehensive budget performance report is a reconciliation between approved revenue and expenditures catalogued in the approved annual budget and actual revenue and expenditures, detailing surpluses and deficits where applicable and reasons for surpluses and deficits to inform future planning and budget execution processes. Therefore, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.2.5 No Approved Financial Manual

Criteria

- 1.2.5.1 Regulation I. A.5 (1) of the PFM Act of 2009 as amended and restated 2019 states "A head of government agency shall with the approval of the Minister issue an accounting manual to suit the operations and regulate the financial matters of the Government agency, indicating:
- a. The duties to be performed by specified officers,
 - b. The accounts to be kept and returns to be submitted, and
 - c. Such other instructions as may be required for the proper conduct of the financial matters of the Government agency.
- 1.2.5.2 Furthermore, Regulation I. A.5 (1) of the PFM Act of 2009 requires the accounting manual shall contain relevant procedures for the keeping of accounts, preparation and format of financial statements, Government agency chart of accounts, and all administrative issues relating to the keeping and preparation of government accounts."

Observation

- 1.2.5.3 During the audit, we observed no evidence of an approved accounting manual to guide the financial management and accounting processes of the entity.

Risk

- 1.2.5.4 In the absence of approved financial manual, financial management and accounting transactions and processes may be performed on a discretionary basis which may be non-compliant with the PFM Act and Regulations.

Recommendation

- 1.2.5.5 Management should develop, approve and operationalize a comprehensive financial manual, outlining all accounting procedures, processes, systems and controls to be used by staff of the entity's Finance Department. The manual should also catalog all processes over initiation, authorization and recording for each account balance and class of transactions. Management should facilitate timely and periodic update of approved financial manual to reflect the

current operations of the Finance Department and amendments made to the PFM Acts and Regulations.

- 1.2.5.6 Evidence of approved financial manual should be adequately documented and filed to facilitate future review.

Management's Response

- 1.2.5.7 *This is noted for compliance as the financial manual is being developed and or drafted for approval by the Board.*

Auditor General's Position

- 1.2.5.8 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.
- 1.2.5.9 Management is therefore in breach of financial discipline in line with Regulation A.20 of the PFM Act of 2009 as amended and restated 2019.

1.2.6 No Automated Financial Management System/ Accounting Software

Criteria

- 1.2.6.1 Regulation I. A.5 (1) of the PFM Act of 2009 as Amended and Restated 2019 states "A head of government agency shall with the approval of the Minister issue an accounting manual to suit the operations and regulate the financial matters of the Government agency, indicating:
- a. The duties to be performed by specified officers,
 - b. The accounts to be kept and returns to be submitted, and
 - c. Such other instructions as may be required for the proper conduct of the financial matters of the Government agency.

- 1.2.6.2 Furthermore, Regulation I. A.5 (1) of the PFM Act of 2009 as Amended and Restated 2019 requires the accounting manual shall contain relevant procedures for the keeping of accounts, preparation and format of financial statements, Government agency chart of accounts, and all administrative issues relating to the keeping and preparation of government accounts."

Observation

- 1.2.6.3 During the audit, we observed no evidence of an automated financial management system or an accounting software to facilitate comprehensive, real-time and accurate recording of financial transactions.

Risk

- 1.2.6.4 The completeness and accuracy of accounting transactions may not be assured. This may lead to misstatement of financial statements of the entity.

1.2.6.5 Accounting data security, integrity, completeness and accuracy may be impaired.

1.2.6.6 Management may not account for all of its transactions.

Recommendation

1.2.6.7 Management should procure and operationalize a functional accounting software to facilitate complete, accurate and real-time recording of all financial transactions of the entity.

1.2.6.8 An automated control should be established such that transactions (along with supporting documents) posted by a junior staff must be reviewed and approved by senior personnel before the transactions appear in the general ledger. Going forward, an automated linkage should be created between the general ledger, trial balance and the financial statements to facilitate completeness and accuracy of the financial statements.

1.2.6.9 Management should also facilitate the operationalization of the electronic document management system by ensuring all relevant source and supporting documents for transactions are scanned, attached to the transactions in the accounting software, archived and maintained to facilitate future review.

Management's Response

1.2.6.10 *Management has secured a software (SMART) which is being piloted beginning 2022 for accounting and payroll purposes.*

Auditor General's Position

1.2.6.11 We acknowledge Management's assertion. However, we observed no evidence of the operationalization of an automated financial management system/ accounting software during the periods under audit as asserted by Management. Therefore, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.2.7 Non-Preparation and Submission of Financial Statements

Criteria

1.2.7.1 Regulation M.9. of the PFM Act of 2009 as amended and restated 2019 states: (1) A state-owned enterprise shall keep proper books of accounts and proper records in as the board may approve. (2) The financial statements of the entity shall comprise (a) a balance sheet of the assets and liabilities of the corporation as at the end of the year; (b) a statement of revenue and expenditure of the corporation for the year; (c) the cash flow statement of the corporation for the year. (3) The financial statements shall be prepared and transmitted to the Auditor-General, the Minister, the Sector Minister, and the Bureau of State Enterprises by the head of the enterprise. (4) The accounts submitted under this regulation shall: (a) be

prepared in accordance with international accounting principles and standards as adopted by the Government of Liberia and in accordance with instructions issued by the Minister in consultation with the Auditor-General; and (b) state the basis of accounting used in preparation and identify significant departures from the principles and the reasons for the departure.

Observation

- 1.2.7.2 During the audit, we observed no evidence that Management prepared and submitted International Financial Reporting Standards financial statements as adopted by the Government of Liberia for the period under review.

Risk

- 1.2.7.3 Failure of Management to prepare and present approved financial statements may deny stakeholders information relevant for decision making.
- 1.2.7.4 Management may not fully account for activities of the entity.

Recommendation

- 1.2.7.5 Management should prepare, approve and present International Financial Reporting Standards Compliant Financial Statements in line with the GoL reporting framework for the entity.
- 1.2.7.6 Going forward, Management should ensure that approved Financial Statements are presented to the Offices of the Auditor General and Comptroller & Accountant General two months after the end of the fiscal period in line with the PFM Act.
- 1.2.7.7 All approved periodic (Quarterly and Annual) financial statements should be adequately documented and filed to facilitate future review.

Management's Response

- 1.2.7.8 *While the financial statements were not prepared or submitted as noted, I consistently raised this issue and formally requested their preparation during multiple Senior Management meetings. Despite these repeated requests, the statements were not produced by the responsible party.*

Auditor General's Position

- 1.2.7.9 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.
- 1.2.7.10 Management is therefore in breach of financial discipline in line with Regulation A.20 of the PFM Act of 2009 as amended and restated 2019.

1.3 Personnel Management

1.3.1 No Salary Scale/Structure

Criteria

- 1.3.1.1 Regulation T.3 (1) (d, e and f) of the PFM Act of 2009 as amended and restated 2019 states "The head of every Management Unit shall keep records of all Personnel Emolument of staff employed in his management unit, to ensure that: (d) authorized establishments or manpower ceilings are not exceeded; (e) the amount of salary and other allowances authorized for payment to each staff is not exceeded; and (f) payments are not made on the payment voucher to staff who do not belong to the Agency or unit."

Observation

- 1.3.1.2 During the audit, we observed no evidence of a salary structure instituted at the entity.
- 1.3.1.3 Further, a reconciliation between the entity's payroll and the GoL Harmonized Pay Grade revealed that salaries disbursed were not consistent with the GoL Harmonized Pay Grade.

Risk

- 1.3.1.4 Salaries may be disbursed and adjustments to payroll may be performed on a discretionary basis. This may lead to misapplication and misappropriation of the entity's funds.

Recommendation

- 1.3.1.5 Management should develop, approve and operationalize a salary structure to regulate salary disbursement at the entity. The approved salary structure should comprehensively catalog the various positions at the entity and respective pay grades for each position. Alternatively, Management should officially adopt and operationalize the GoL Harmonized Pay Grade for disbursement of salaries at the entity.
- 1.3.1.6 Management should ensure that all adjustments to the payroll are approved by the relevant authority, supported by the required documentation and consistent with approved salary structure and the Human Resource policy of the entity.
- 1.3.1.7 Evidence of approved salary structure, evidence of adoption of GoL Harmonized Pay Grade (where applicable), and all relevant supporting records for adjustments to the payroll should be adequately documented and filed to facilitate future review.

Management's response

- 1.3.1.8 *The Human Resource Unit was not authorized to design or implement a salary structure. All salary decision during the period were made directly by the Director General and the Deputy Director General for Administration. The HR Unit did not have signatory or decision-making*

power on matters relating to compensation. Although a Salary Standardization Committee was established in 2021, its recommendations were never operationalized due to lack of executive endorsement or administrative reasons that were not shared with the HR Unit.

- 1.3.1.9 This reflects a government gap at the executive level and not a failure of HR executive, as HR lacks legal authority to implement salary structure independently.

Auditor General's Position

- 1.3.1.10 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.3.2 Non-Competitive Recruitment

Criteria

- 1.3.2.1 According to Section 2.9 of the Decent Work Acts of 2015, the recruitment practices of an entity shall consist of the followings:

Advertising

- i. Advertising
- ii. Recruitment procedures
- iii. Selection procedures,
- iv. Appointment and the appointment process etc

Observation

- 1.3.2.2 During the audit, we observed no evidence that the recruitment procedures were in accordance with Section 2.9 of the Decent Work Act of 2015. **See table 1 below for details.**

Table 1: Non-Competitive Recruitment

No	LAST NAME	FIRST NAME	POSITION	QUALIFICATION	DATE HIRED	STATUS
1	Jah	Mohammed Bill	IT Officer	High School Diploma	1-Jul-23	Full -Time
2	Vankan	Alfred W.	Security	High School Diploma	1-Apr-19	Contractor
3	Jimmy	Kontoh D.	Maintenance Assistant	High School Diploma	1-Apr-19	Full -Time
4	Francis	Olivia S.	Cleaning Assistant	Not Provided	1-Apr-19	Contractor
5	Winton	Goffa P	Security	High School Diploma	2-Jan-21	Contractor
6	Jallah	Jekins K.	Security	High School Diploma	2-Jan-21	Contractor
7	Ansumana	Tamba	Security	High School Diploma	1-Apr-21	Contractor
8	Smith Jr.	Smith G.	Security	High School Diploma	1-Apr-23	Contractor
9	Goryoubah	Elijah P.	Security	High School Diploma	1-Apr-23	Contractor
10	Browne	Tommy P.	Cleaning Assistant	Not Provided	1-Sep-23	Contractor

Risk

- 1.3.2.3 Management may be non-compliant with Section 2.9 of the Decent Work Act of 2015.
- 1.3.2.4 Management may recruit staffs that do not meet the required qualification and experience to contribute to the overall objectives of the entity.

Recommendation

- 1.3.2.5 Management should provide substantive justification for not facilitating competitive recruitment for employees comprehensively catalogued in table 1 above.
- 1.3.2.6 Management should ensure that all recruitment activities are carried out in full compliance with the approved/adopted human resources policy.
- 1.3.2.7 Management should ensure that all employees' files contain the relevant supporting document indicative of proper vetting (an approved job description, publication of vacancies, job related test/ interview questions and background check information) in line with the approved/adopted human resources policy. Evidence of approved hiring documentation should be adequately documented and filed to facilitate future review.

Management's response

- 1.3.2.8 *Recruitment decisions were made by the Office of Director General. While HR was tasked with administrative follow-ups such as onboarding documentation, it had no authority to initiate, advertise, or approve appointments. All final decision were taken at senior management level, often without consultation with the HR Unit.*

Auditor General's Position

- 1.3.2.9 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.3.3 No Employees Performance Appraisal

Criteria

- 1.3.3.1 Chapter 8, Section 1, reports 8.1.1 of the Civil Servants Standing Order of 2021 provides that "all classified Civil Servants shall have their work performance appraised at the end of the calendar year. Performance Appraisal Reports shall be completed by officers who are the immediate supervisors of those being appraised. Reports shall be made on the standard performance appraisal report form and a copy of which shall be forwarded to the Director General within 15 working days of the end of the calendar year".

Observation

- 1.3.3.2 During the audit, we observed no evidence that Management conducted performance evaluation of its employees during the fiscal periods under review as required.

Risk

- 1.3.3.3 The lack of periodic performance appraisal may lead to unnoticed and/or consistent poor performance by employees of the entity, thereby impairing the achievement of the entity's objectives.
- 1.3.3.4 In the absence of a documented performance evaluation system, employees' development plan may not be achieved thereby impairing the achievement of the entity's objectives.
- 1.3.3.5 Employees may be promoted or demoted on a discretionary basis.

Recommendation

- 1.3.3.6 Management should facilitate the conduct of periodic performance evaluations for all staff.
- 1.3.3.7 Employees should be familiarized with performance goals and be given the opportunity to periodically evaluate themselves against set goals. Subsequently, performance managers/supervisors should evaluate the performance of assigned employees against set goals and update the employees about the result of the evaluation including areas of targeted development.
- 1.3.3.8 Management should solicit post feedback from employees about the fairness of the performance evaluation system and make adjustments where applicable.
- 1.3.3.9 Documentation for performance evaluation should be adequately filed to facilitate future review.

Management's response

- 1.3.3.10 *No performance appraisal mechanism was implemented during the audit period. The HR Unit drafted proposals in line with Part IV, Section 9 of the Decent Work Act, which encourages regular performance assessments. Although we made an effort by providing an appraisal form, we were told there was no funding. The proposals also required management approval and broader endorsement, which were not granted. It's worth noting that some employees, who lacked the necessary skills or qualification, were connected to senior management – raising concerns that the appraisal process might have affected them.*
- 1.3.3.11 *The absence of appraisal was therefore an institutional constraint, not a negligence of HR duty.*

Auditor General's Position

- 1.3.3.12 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.3.4 Staff Maintained on Payroll beyond Contracted Period

Criteria

1.3.4.1 Section 13.2(a, b & c) of the decent work Act of 2015- provides that:

- a) A casual employee who is engaged by the same employer on a regular and systematic basis for a sequence of periods of employment during a period of six months shall thereafter have the right to choose instead to become a full- time or part-time employee, according to the number of hours the employee is usually engaged to work.
- b) An employer of a casual employee within the meaning of paragraph a) shall give the employee written notice within four weeks of the employee having been so engaged for a period of six months.
- c) An employee who receives a notice under paragraph b) of this section shall choose whether to change their employment status within four weeks of receiving the notice, and an employee who takes no action within that period will be deemed to have chosen not to change their employment status.

Observation

1.3.4.2 During the audit, we observed that the following staff were maintained on the payroll beyond their contracted period. **See Table 2 below for details.**

Table 2: Staff on Payroll beyond the Contracted Period

No	Name	Gender	Date of first contract	Position	Duration on Contract
1	Alfred W.Vankan	Male	1-Feb-19	Security	More than six years on six months Contract
2	Olivia Francis	Female	February 1,2019	Cleaning Assistant	More than six years on Six months contract
3	Ansumana Tamba	Male	February 1,2021	Security	More than four years on six months contract
4	Tony G. Smith	Male	April 1,2023	Security	More than one year on three months contract
5	Elijah P. Goryoubah	Male	April 1,2023	Security	More than one year on three months contract
6	Tommy P. Browne	Male	September 1,2023	Cleaning assistant	More than Ten Months on three months contract

Risk

1.3.4.3 Salaries may be disbursed to illegitimate personnel for service not performed. Staff who may have left the entity may still be maintained on the payroll.

1.3.4.4 Management may be non-compliant with Section 13.2(a, b & c) of the Decent Work Act of 2015.

Recommendation

1.3.4.5 Management should provide substantive justification for not regularizing the contract status of contractors. Subsequently, Management should review and where applicable regularize the contract status including updating of contracts and files of all contractors in active service.

1.3.4.6 Management should ensure that evidence of service performed by contractors including periodic performance and activities reports (where applicable) are obtained, validated and adequately documented and filed to facilitate future review.

1.3.4.7 Going forward, Management should ensure that all contractors/casual employees who are employed on the regular and systematic basis for a sequence of period of employment during a period of six (6) months should be given the right to choose instead to become a full time or part time employee within four (4) weeks of the employee having been so engaged for period of six (6) months, consistent with the law.

Management's Response

1.3.4.8 *Contract renewals and terminations were handled at the Executive level. The maintenance of such staff on payroll was not initiated or approved by HR.*

1.3.4.9 *Under the standard organogram and scope of duties, payroll activation and suspension fell under Finance or Executive director – not HR.*

Auditor General's Position

1.3.4.10 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.3.5 No Automated Payroll Management System

Criteria

1.3.5.1 Section 36(1) of the Public Financial Management (PFM) Act of 2009 as amended and restated 2019 states that "it is a general responsibility under this Act for all government officials handling public financial transactions to ensure that financial information is reported in a timely, comprehensive, and accurate manner, in the manner prescribed in this Act, under its regulations, and in instruction issued by the Minister".

Observation

1.3.5.2 During the audit, we observed no evidence of an automated centralized payroll management system to facilitate the effective payroll management of the entity. The payroll was managed in MS excel.

Risk

- 1.3.5.3 Data integrity, security and completeness and accuracy of payroll records may be impaired.
- 1.3.5.4 In the absence of a centralized payroll management system, the computation of taxes, other deductions and net salaries may be impaired.
- 1.3.5.5 Management may not account for all its payroll transactions.

Recommendation

- 1.3.5.6 Management should procure and operationalize a functional payroll system to facilitate complete, accurate and real-time recording of all payroll transactions of the entity.
- 1.3.5.7 An automated control should be established such that transactions (along with supporting documents) posted by a junior staff must be reviewed and approved by senior personnel before the transactions appear in the payroll ledger. Going forward, an automated linkage should be created between the payroll ledger, trial balance and the financial statements to facilitate completeness and accuracy of the financial statements.
- 1.3.5.8 Management should also facilitate the operationalization of the electronic document management system by ensuring all relevant source and supporting documents for payroll transactions are scanned, attached to the transactions in the payroll and accounting software, archived and maintained to facilitate future review.

Management's Response

- 1.3.5.9 *The payroll function was manually managed by the Finance Department. HR neither had access to the payroll software nor oversight authority over salary payments. HR's involvement was limited to submitting staffing data, with no access to verify disbursement logs or computation*
- 1.3.5.10 *Management has secured a software (SMART) which is being piloted (since the beginning of 2022) for a subsequent integration of Management system. This is noted for compliance.*

Auditor General's Position

- 1.3.5.11 We acknowledge Management's assertions. However, we observed no evidence of the operationalization of an automated payroll management system during the periods under audit as asserted by Management. Therefore, we maintain our finding and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.3.6 Lack of Segregation of Duties in Payroll Management

Criteria

- 1.3.6.1 According to COSO Framework 2011, paragraph 148, "senior management and the board of

directors establish the organizational structure and reporting lines necessary to plan, execute, control and periodically assess the activities of the entity. This goal is to provide for clear accountability and information flow within and across the overall entity, and its subunits”.

Observations

- 1.3.6.2 During the audit, we observed no evidence that monthly payroll originated from the Human Resource Unit and forwarded to the Finance Unit for processing.
- 1.3.6.3 Additionally, we observed no evidence that the payroll journals were subsequently submitted to heads of department/units to review and corroborate salaries to be disbursed to personnel of respective department/units.
- 1.3.6.4 Further, we observed no evidence that the Internal Audit Department performed post reconciliation among the net salary per the payroll journals, the debit instructions issued to the banks and the bank statements to corroborate that approved net salaries were reconciled to actual disbursements.

Risk

- 1.3.6.5 Lack of segregation of duties of such key functions may impair checks and balances, thereby, leading to misappropriation of the entity's fund.
- 1.3.6.6 Inadequate review of the payroll may lead to ghost or undeserving staff being compensated. This may also lead to salaries being paid for work not performed.
- 1.3.6.7 Approved adjustments to the payroll may not be implemented.
- 1.3.6.8 Unauthorized adjustments may be undetected leading to misappropriation of the entity's fund.

Recommendation

- 1.3.6.9 Management should facilitate segregation of duties and check and balances in the preparation of monthly payroll. All adjustments to the payroll should be cataloged by the Human Resource Department and submitted to the Finance Department for processing. Subsequently, the Finance Department should submit the adjusted payroll per department to the head of each department/units and the Human Resource Department for validation before submission to MFDP for processing.
- 1.3.6.10 The Internal Audit Department should facilitate post reconciliation among the net salary per the payroll journals, the debit instructions issued to the banks and the bank statements to corroborate that approved net salaries were reconciled to actual disbursements on a monthly basis.

- 1.3.6.11 Evidence of approved monthly payroll journals, approved adjustments to the payroll, post disbursement reconciliation and all other relevant supporting records should be adequately documented and filed to facilitate future review.

Management's Response

- 1.3.6.12 *During the audit period, the process of payroll validation, processing, and approval were centralized within a limited group under the Finance and Director General for Administration. This structure was established based on the directive from Executive Management, who, due to the sensitive nature of payroll matters, decided that the Finance Department would be solely responsible for managing the monthly payroll process.*
- 1.3.6.13 *Following the first round of the National elections in 2023, payroll-related documents were consistently shared with both the Human Resource and the internal auditor. Prior to this period HR was only selectively included in payroll communications, typically in cases involving account number verification or employee-specific information.*
- 1.3.6.14 *It is important to note that payroll submissions were sent to Hon. Jallah for review. In several instances, salary payments were executed without prior notification or involvement from HR. In such cases, I was informed only after the transactions had already taken place. Nonetheless, I was still required to formalize the process by drafting a request instructing the Finance Department to proceed with salary payments for that month.*
- 1.3.6.15 *HR was not included in the formal payroll review or approval chain prior to payment, and the lack of segregation of duties in this process was a structural and organizational matter beyond the purview of the HR unit.*
- 1.3.6.16 *We acknowledge the importance of role segregation and accountability in payroll management, and we remain committed to working with relevant department to enhance internal controls and ensure greater transparency going forward.*

Auditor General's Position

- 1.3.6.17 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.3.7 Non-Remittance of Social Security's Contributions

Criteria

- 1.3.7.1 Section 89.16(a) of the NASSCORP New Act and published February 13, 2017 states that "The contribution payable under this Act in respect of an employee shall comprise contribution payable by the employer (hereinafter referred to as the employer's contribution) and contribution payable by the employee (hereinafter referred to as the employee's

contribution) and shall be paid to the Corporation. Contribution rate shall be total 10% of the total gross remuneration of each employee; 2% under the Employment Injury Scheme payable by the employer; 4% employer contribution and 4% employee contribution to be remitted by the employer."

Observation

- 1.3.7.2 During the audit, we observed no evidence of payment receipts for remittance of employees' and employer's contributions made to NASSCORP for FY 2018/2019 to FY 2022.

Risk

- 1.3.7.3 Management may be non-compliant with NASSCORP General Regulations of 2018 which may result to penalties and fines.
- 1.3.7.4 Potential retirees of entity may be denied required pension benefits due to non-compliance with the Regulation.
- 1.3.7.5 The completeness and accuracy of social security contributions for employees may be misstated. This may lead to inaccurate computation of employees' social security benefits.
- 1.3.7.6 Non-remittance of social security contributions may lead to misapplication / misappropriation of the fund.

Recommendation

- 1.3.7.7 Management should provide substantive justification for not withholding and remitting social security contributions for FY 2018/2019 to FY 2022.
- 1.3.7.8 A payment plan should be crafted and agreed between Management and NASSCORP Management for full settlement of all arrears. Management should budget for and ensure full compliance to the terms of the agreed payment plan. Management should also ensure that future employers' contributions are adequately provided for in the approved budget on an annual basis (where applicable).
- 1.3.7.9 Management should facilitate full payment of employees' and employer's contributions to NASSCORP on a consistent and timely basis.
- 1.3.7.10 Management should ensure that a comprehensive reconciliation is performed with NASSCORP records to ensure that individual employees social security contributions are duly allocated and compiled to validate the completeness and accuracy of employees' social security contributions.
- 1.3.7.11 Going forward, monthly remittance of social security contributions should be accompanied by a listing of employees and their social security numbers for ease of allocation to employees' NASSCORP accounts respectively.

- 1.3.7.12 Evidence of remittances of monthly social security contributions and all relevant supporting records should be adequately documented and filed to facilitate future review.

Management's Response

- 1.3.7.13 *HR submitted employee data to Finance for remittance to the National Social Security and Welfare Corporation (NASSCORP), as required. However, actual payments and filing were the responsibility of the Finance Department. HR had no access to payment record or remittance receipts and thus could not validate or enforce compliance. Management also said due to its financial constraints, NASSCORP contribution could not be paid until 2022.*

Auditor General's Position

- 1.3.7.14 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.3.8 Non-Monitoring of Attendance Log

Criteria

- 1.3.8.1 Section 7(e) of LPRA Personal Policy on 'Attendance Punctuality' states: Normal working hours are laid down by the Authority from time to time and these may be based directly on guidelines given by the DIRECTOR GENERAL:
- Attendance and punctuality are based on these guidelines. All employees must be ready at work by 9 A.M. Monday-Friday and no Employee may leave the Authority premises (except during approved breaks such as lunch hour) during working hours without the permission of their supervisor.
 - An employee who reports to work tardy three (3) times in the same week will be given a first warning letter. If the trend is repeated for the second time, he/she will be given a second warning letter. If it is repeated for the third time, a deduction of what amounts to one day's salary will be taken from his month's pay.
 - Daily attendance is required of all employees. When an employee is unable to come to work due to illness or personal emergency, the employee should notify the immediate supervisor and Human Resource Department not later than 10:00 a.m. either verbally or in writing.
 - The supervisor decides whether the absence will be excused. If an employee must leave work on personal business, he or she must inform the immediate supervisor before leaving the office. All employees are required to sign in at the time of commencing work and sign out at the end of each day's work.

Observation

- 1.3.8.2 During the audit, we observed that the daily attendance logs were not adequately supervised or monitored by staff of the Human Resource Department.
- 1.3.8.3 Further, Personnel are processed on the payroll without reference to the signed daily attendance log.

Risk

- 1.3.8.4 Failure to monitor and supervise personnel attendance records may result to compensation of non-deserving employees. This practice may cultivate an inappropriate work culture at the entity and may subsequently impair the operations and performance of the entity.
- 1.3.8.5 The absence of an accurate attendance log to monitor staff on a daily basis may lead to ghost or undeserving staff being compensated. This may also lead to salaries being paid for work not performed.

Recommendation

- 1.3.8.6 Management should ensure that all staff sign the daily attendance records. The daily attendance sheet should include the following columns: name of employee, department, position, signatures and time for in and out periods.
- 1.3.8.7 Management should conduct periodic spot checks to ascertain the authenticity of the attendance records. The attendance records including spot checks records should be adequately documented and filed to facilitate future review.
- 1.3.8.8 Management should ensure that personnel attendance records are regularly monitored by a designated staff and that employees should be reprimanded in line with the entity's employees' handbook for failing to report to work.

Management's Response

- 1.3.8.9 *Attendance was managed by individual supervisors, and not by the HR. HR submitted monthly attendance reports to our immediate supervisor, Deputy Director General for Administration, including recommendations for salary deductions due to unexcused absences without justification. However, we never received any response, likely because many of the affected employees had close relationship with senior management.*

Auditor General's Position

- 1.3.8.10 Management's assertions were not supported by documentary evidence. Copies of monthly attendance reports prepared by HR as asserted in Management's response were not made available for audit purposes. Therefore, we maintain our finding and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.3.9 Non-Performance of Exit Conference for Resignation

Observation

- 1.3.9.1 During the audit, we observed that Management did not perform exit conference for staff who had resigned during the period under review.

Risk

- 1.3.9.2 In the absence of an exit conference upon resignation, Management may not be aware of the underlying reason (s) for employees' resignation. This may lead to high labor turnover of employees.

Recommendation

- 1.3.9.3 Management should facilitate the performance of exit conference for all staff departing the entity to ascertain the reason(s) for resignation.
- 1.3.9.4 Management should catalog reason(s) obtained from exiting staff during the exit conference to aid in the formulation of employee's development plan. Existing resources should be used to resolve significant issues raised by exiting personnel.
- 1.3.9.5 Evidence of exit conference and actions to address significant concerns should be adequately documented and filed to facilitate future review.

Management's response

- 1.3.9.6 *Exit management was not institutionalized. Resignation letters were addressed directly to the Director General or the Administrator, not to the HR. In many cases, HR was only informed verbally after employees had already resigned. As a result, there was a clear gap – no formal exit protocol, no consistent clearance process, and no routine exit interviews. Final clearance decisions were often made outside of HR, limiting our ability to manage the process properly.*

Auditor General's Position

- 1.3.9.7 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.4 Cash Management

1.4.1 Unapproved Monthly Bank Reconciliation Statements

Criteria

- 1.4.1.1 Regulation R.3 (6) of the PFM Act of 2009 as amended and restated 2019 states that "the balance of every bank account as shown in a bank statement shall be reconciled with the corresponding cashbook balance at least once every month; and the reconciliation statement shall be filed or recorded in the cash book or reference to the date and number thereof".

Observation

- 1.4.1.2 During the audit, we observed that monthly bank reconciliation statements prepared by the Finance Consultant were not reviewed and approved as required. **See table 3 below.**

Table 3: Unapproved Monthly Bank Reconciliation Statements

Fiscal Year	Account Type	Account #	Bank	Currency
July 1, 2018 – December 31, 2018	Operations	001-21971054130102	IBLL	USD
	Operations	001-21911054130201	IBLL	LD
	Operations	1602005200	CBL	USD
	Operations	1601004055	CBL	LD

Risk

- 1.4.1.3 Failure to review and approve bank reconciliation statements may lead to untimely detection of errors or omissions and fraud.
- 1.4.1.4 Management may not fully account for all of its transactions.

Recommendation

- 1.4.1.5 Management should ensure that monthly bank reconciliation reports are prepared, reviewed and approved for each operational and designated account established by the entity.
- 1.4.1.6 Evidence of approved monthly bank reconciliation reports should be adequately documented and filed to facilitate future review.

Management's Response

- 1.4.1.7 *Bank reconciliations being performed on a monthly basis as evidenced in our files. For an additional control, the Internal Auditor is now required by Senior Management to verify the preparations and submissions to said management.*

Auditor General's Position

- 1.4.1.8 Management's assertion did not adequately address the issues raised. We observed no evidence of approval of monthly bank reconciliation statements prepared during the periods under audit as required. Therefore, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.4.2 Irregularities Associated with Petty Cash

Criteria

- 1.4.2.1 Sections 5 (1.1, 1.2, 1.4, 1.6 & 2.4) of the NPHIL Financial Management Policy & Procedures Manual states that "5.1.1 A petty cash request form is filled, accompanied by appropriate invoices/receipts, and sent for approval. 5.1.2 Note that petty cash requests can be received

with approval from either the DG, DDGTS, DDGA, or Comptroller. The Comptroller must authorize a request of this nature.

- 1.4.2.2 The cashier completes a Petty Cash Voucher attaches the approved request form and any invoices/receipts submitted, and sends it to the Chief Accountant of NPHIL and Controller for final approval. 5.1.6 The cashier must file the documents and make a record of the transaction in the petty cash book". 2.4 The petty cash reconciliation is then reviewed and signed by the comptroller".

Observation

- 1.4.2.3 During the audit, we observed the following irregularities associated with petty cash of the entity:
- No evidence of a petty cash policy to regulate the management of petty cash of the entity;
 - Petty cash and near cash items (such as cheques, fuel coupons and calling cards, etc) were not kept in a metallic safe and the facility was not protected by a metallic door;
 - There was no restricted access to the facility in which the petty cash was kept;
 - Petty cash was replenished without evidence of expenditure/liquidation reports.

Risk

- 1.4.2.4 In the absence of a petty cash policy, petty cash may be disbursed on a discretionary basis non-compliant with applicable laws and regulations. This may lead to misappropriation of petty cash funds.
- 1.4.2.5 Petty cash may be susceptible to theft if maintained in an unsafe facility or exposed to unauthorized personnel.
- 1.4.2.6 Replenishing petty cash without expenditure/liquidation reports may impair accountability and lead to misappropriation of petty cash fund.

Recommendation

- 1.4.2.7 Management should develop, approve and operationalize a petty cash policy to govern the management of petty cash of the entity. The policy should include provisions for the following:
- Nature of petty cash transactions.
 - The size of the petty cash/imprest.
 - The threshold of petty cash transactions.
 - The custodian and safe of petty cash.
 - Activities over processing petty cash and disbursement of petty cash transactions.
 - Activities over replenishment of petty cash.

- 1.4.2.8 All relevant supporting documents including approved petty cash policy and payment vouchers for petty cash disbursement and replenishment should be adequately documented and filed to facilitate future review.
- 1.4.2.9 Management should ensure that the facility used for storage of petty cash is protected by a metallic door and that petty cash should be maintained in a metallic safe. Management should also ensure that the facility is restricted to authorized persons at all times.
- 1.4.2.10 Management should facilitate segregation of duties over the storage, processing and approval of petty cash transactions. Petty cash transactions should be managed by the Cashier/finance officer, and approved by the Chief Accountant and/or Comptroller.
- 1.4.2.11 Management should facilitate the timely liquidation of petty cash transactions through preparation and approval of periodic expenditure reports before petty cash is replenished. Evidence of periodic expenditure/liquidation reports along with all supporting records should be adequately documented and filed to facilitate future review.

Management's Response

- 1.4.2.12 *An effective petty cash system is in place at LPRA; however, the initial custodian, the HR, for which a mini safe was procured for refused to further the custodianship, thus transferring such obligation to the Comptroller as operations are not to be halted.*
- 1.4.2.13 *The petty cash ceiling at LPRA is USD100 and its equivalent in LRD and below; the float is at USD750, approved by Senior Management. Individual staff from each department requests cash for operations, approved by their supervisors before payment by the custodian. Where required, receipts are brought back to authenticate the cash utilization.*

Auditor General's Position

- 1.4.2.14 Management's assertions were not supported by documentary evidence. We observed no evidence of petty cash policy comprehensively cataloguing approved petty cash ceiling and float as asserted in Management's response. We also observed no evidence of periodic liquidation reports. Therefore, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.4.3 Misapplication of Overdraft Facility

Criteria

- 1.4.3.1 A.15. of the PFM Regulation of 2009 states: Unauthorized, Irregular, Fruitless and Wasteful Expenditure (1) The head of government agency must exercise all reasonable care to prevent and detect unauthorized, irregular, fruitless and wasteful expenditure, and must for this purpose implement clearly defined business processes, identify risk associated with these processes and institute effective internal control to mitigate these risks.

- 1.4.3.2 Regulation 15 (2) states that: When an official of a government agency discovers unauthorized, irregular or fruitless and wasteful expenditure, that official must immediately report such expenditure to the head of the government agency. Such expenditure must also be reported in the monthly report, as required by section 36(2) of the Public Finance Management Act 2009. Where irregular expenditure occurred in contravention of procurement procedures, the relevant procurement committee of the government agency must also be notified.

Observation

- 1.4.3.3 During the audit, we observed that Management, with the approval of the only then existing board member, obtained an overdraft facility of US\$250,000 in April 2021 with a six-month repayment term from the International Bank Liberia Limited.

- 1.4.3.4 This amount was intended to facilitate the bid round activities on the Harper Basin Oil Blocks. It was approved that proceeds generated during the bidding process would have been utilized for the repayment of the overdraft. However, the bid round was not carried out, and the amount, without the approval of the board, was used on other operations. The current balance of the overdraft as at the time of the audit amounted to US\$236,779.75.

Risk

- 1.4.3.5 Management may be non-compliant with Regulation A. 15 (1) and (2) of the PFM.
- 1.4.3.6 The usage of overdraft facility for unintended purposes may lead to misappropriation of the entity's funds.
- 1.4.3.7 Continuous acquisition of an overdraft facilities without a specified justification may lead to significant interest payments and uncontrolled expenditures.

Recommendation

- 1.4.3.8 Management should provide substantive justification for utilizing the overdraft facility for unintended purposes.
- 1.4.3.9 Going forward, Management should ensure that all overdraft facilities are utilized for their intended purposes as approved by the board of directors.
- 1.4.3.10 Management should also plan/budget for the repayment of overdraft facilities to ensure that overdraft expenditures are settled within approved timelines.
- 1.4.3.11 Evidence of overdraft expenditures reports, repayment of overdraft expenditures, original copies of bank statements and all relevant supporting records should be adequately documented and filed to facilitate future review.

Management's Response

1.4.3.12 *No response.*

Auditor General's Position

1.4.3.13 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.5 Procurement Management

1.5.1 Irregularities Associated with Procurement Management

Criteria

1.5.1.1 Section 30 (1 and 2) of the Public Procurement and Concessions Act of 2005 as amended and restated in 2010 states: "(1) Each Procurement Committee shall constitute a Bid Evaluation Panel with the required expertise as and when required to evaluate bids solicited by the Procuring Entity. (2) A Bid Evaluation Panel shall be responsible for the evaluation of bids in accordance with the predetermined and Published evaluation criteria as outlined to bidders in the bid documents in accordance with this Act and shall prepare and submit evaluation reports and recommendations for award for the consideration of the Procurement Committee or the Head of the Procuring Entity as provided in the Schedule".

1.5.1.2 Section 32 (1, 2 and 3) of the Public Procurement and Concessions Act of 2005 as amended and restated in 2010 states: (1) "In order to participate in procurement proceedings, a bidder must qualify by meeting the criteria set by the Procuring Entity, which will normally include evidence of: (a) Professional and technical qualifications; (b) Equipment availability, where applicable; (c) Past performance; (d) After-sales service, where applicable; (e) Spare parts availability; (f) Legal capacity; (g) Financial resources and condition; and (h) Verification by the internal revenue authority of payment of taxes and social security contributions when due. (2) The qualification criteria set forth in subsection (1) of this Section shall be applied by examining, through investigation and collaboration with other relevant agencies, to ascertain whether or not the bidder meets the minimum qualification criteria established for the bid and not by using a point system for comparing the relative level of qualifications of participating bidders. (3) The Procuring Entity shall be entitled to demand qualification documentation from potential bidders in formal prequalification proceedings, or as a required component of a bid submission".

Observation

1.5.1.3 During the audit, we observe the following irregularities associated with the procurement system:

- No evidence of functional procurement committee evidenced by the absence of

meeting minutes and periodic reports.

- No evidence of annual procurement plan approved by PPCC for FYs 2018/2019, 2022 and 2023.
- No evidence of periodic (quarterly and annual) procurement activities report submitted to PPCC.
- No evidence of application of the requisite methods (Request for quotation, national competitive bidding, sole sourcing, restricted bidding, international competitive bidding, etc.) where applicable.

Risk

- 1.5.1.4 In the absence of a functional procurement committee, the entity's procurement processes may be discretionary.
- 1.5.1.5 The lack of an approved Procurement Plan may lead to discretionary expenditure, waste and impair value for money.
- 1.5.1.6 In the absence of quarterly and annual procurement activities reports, Management may be non-compliant with the PPC Act of 2005 as amended and restated 2010.
- 1.5.1.7 Management may not adequately account for its procurement activities and impair effective monitoring of its procurement activities by the PPCC.
- 1.5.1.8 The non-application of the requisite procurement method may impair the achievement of value for money and facilitate fraudulent procurement activities.

Recommendation

- 1.5.1.9 Management should establish a functional procurement committee evidenced by the documentation of meeting minutes and periodic reports.
- 1.5.1.10 Management should facilitate the approval of annual procurement plan by PPCC. All unplanned procurement activities should be subsequently submitted to PPCC for approval before execution.
- 1.5.1.11 Management should facilitate the preparation and submission of quarterly and annual procurement activities reports to the PPCC as required by the PPC Act of 2005 as amended and restated 2010.
- 1.5.1.12 Management should ensure that the requisite procurement methods are utilized for all procurement transactions to achieve value for money and ensure compliance to the PPC Act of 2005 as amended and restated 2010.

- 1.5.1.13 Evidence of periodic procurement committee minutes, approved annual procurement plan, quarterly and annual procurement activities reports, and all relevant supporting procurement records should be adequately documented and filed to facilitate future review.

Management's Response

- 1.5.1.14 *No response.*

Auditor General's Position

- 1.5.1.15 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.5.2 Irregularities in the Awarding of Reconnaissance License

Criteria

- 1.5.2.1 Section 12.4 the Petroleum Law of 2016 states that "The Director General shall appoint a bid evaluation panel having both technical and legal skills. The panel shall include representatives of both the Authority and NOCAL, and at least one member who is an employee of neither entity. The panel shall prepare and submit to the Director General a bid assessment report containing recommendations on the classification of the bids and provide detailed information about all of the bids. Decisions of the panel shall be recorded, including any dissenting views, and signed by the members of the panel and annexed to the bid assessment report. The Director General shall forward the report to the Board accompanied by his or her recommendations. The Board shall determine the winning bidder. If the Director General does not recommend, or the Board does not approve, the bidder given the highest ranking by the bid evaluation panel, the award must be approved by the Ministry of Justice. The report of the bid evaluation panel shall be made available of the public and notice of its available shall be published on the Authority's website."
- 1.5.2.2 Additionally, section 15.4 the Petroleum Law of 2016 states that "Technical qualification shall take into account the past and current worldwide experience of the applicant, the size, nature and scope of the petroleum projects in which the applicant has been involved as an operator or participant, and the quality of its health, safety and environmental practices, provided that no applicant shall be excluded from the pre-qualification process solely on account of its size if it otherwise meets applicable standards for a participant or an operator."
- 1.5.2.3 Moreover, section 41 of the PPC Amended Regulation of 2014, "Selection based on Quality (Section 70 of the Act) (1), A Procuring Entity shall employ a quality-based selection method of procurement in accordance with section 70 of the Act only where the method is approved both by the Procurement Committee of the Entity and the Commission. (2) When the quality-based selection method is used, the Entity shall: (a) Request bidders to submit only technical

proposals or both Technical and Financial proposals, but indicate that financial will be considered for the highest ranked bidder only. (b) Specify the minimum technical score that must be attained before a financial proposal is requested or considered. (c) Invite the bidder with highest technical score to negotiate a contract provided that technical score is above the minimum required technical score specified by the entity in the bidding document.

Observation

1.5.2.4 During the audit, we observed that in FY 2023, Management granted Canadian Global Energy (CGE) Liberia, a Reconnaissance License (No. LPRA-002) for US\$500,000.00, to conduct geotechnical surveys and evaluations in Blocks LB26, LB30, and LB31 in the Harper Basin. The license was granted contrary to the advice and recommendations of the Technical Committee that was setup to review the technical and financial proposals submitted by bidders. The following reasons were provided for the non-provision of Reconnaissance License to CGE by Deloitte & Touche Project Monroe II Due Diligence Report dated April 21, 2023:

1.5.2.5 "In conclusion, Canadian Global Energy Corp's operations in Namibia are clouded by contradictory information, and the company has not submitted critical information necessary for stakeholders to evaluate their operations. As per the Petroleum Law, Canadian Global Energy Corp is in complete violation of section 15.4. It is recommended that CGE provides transparent information on their establishment in Namibia, submits audited accounts and financial reports, proves their technical capability, and fulfills their environmental obligations. Failure to comply with these recommendations may lead to reputational damage and jeopardize their operations in Liberia."

Risk

1.5.2.6 Non adherence to the Technical Committee's assessment may lead to hiring of an inappropriate contractor. This may impair the achievement of value for money and the entity's objectives. losses.

1.5.2.7 Management may be non-compliant with the required procurement method. Management may override the procurement process by completing disbursement without utilizing the required procurement method.

Recommendation

1.5.2.8 Management should regularize the process leading to the award of the Reconnaissance License granted to CGE by ensuring that CGE provides transparent information on their establishment in Namibia, submits audited accounts and financial reports, proves their technical capability, and fulfills their environmental obligations as recommended by the Technical Committee.

- 1.5.2.9 Subsequently, the Technical Committee should evaluate the current performance and technical capability of CGE as well as fulfilment of their environmental obligation in Liberia, since the issuance of the reconnaissance license. The Technical Committee should then recommend continuation or discontinuation where applicable base on the result of the assessment, and the recommendations should be subsequently implemented by Management. Evidence of the Technical Committee assessment reports should be submitted to the Office of the Auditor General and the National Legislature for validation, three (3) months after the issuance of the Auditor General's report.

Management's response

- 1.5.2.10 *No response.*

Auditor General's Position

- 1.5.2.11 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.6 Expenditure Management

1.6.1 Payment Vouchers without Evidence of Adequate Supporting Documents

Criteria

- 1.6.1.1 Regulation P.9 (2) of the PFM Act of 2009 as amended and restated 2019 states that "Payments except for statutory transfers and debt services shall be supported by invoices, bills and other documents in addition to the payment vouchers."

Observation

- 1.6.1.2 During the audit, we observed no evidence of adequate supporting documents, such as invoices, delivery notes, business registration, tax clearance certificate etc., for various expenditures amounting to US\$85,360.40 and L\$1,903,398.00. **See Annexure 1a. And 1b**

Risk

- 1.6.1.3 Payments may be made for goods not delivered or services not performed. Goods delivered or services performed may not meet the approved specifications.
- 1.6.1.4 In the absence of adequate supporting documents, the validity, occurrence, and accuracy of payments may not be assured. This may lead to misappropriation of the entity's funds.
- 1.6.1.5 The absence of adequate supporting documentation for transactions may also lead to fraudulent financial management practices, through the processing and disbursement of illegitimate transactions.

- 1.6.1.6 Management may override the procurement processes by completing disbursement without utilizing the required procurement methods.

Recommendation

- 1.6.1.7 Management should fully account for expenditures made without adequate supporting documents.
- 1.6.1.8 Going forward, Management should ensure all transactions are supported by the requisite supporting documents consistent with the financial management regulations. Documentation such as contracts, invoices, goods received notes, job completion certificates, purchase orders, payment vouchers etc. should be prepared and approved for the procurement of goods and services where applicable. All relevant supporting records should be adequately documented and filed to facilitate future review.
- 1.6.1.9 Additionally, Management should facilitate the operationalization of the electronic document management system by ensuring that all relevant source and supporting documents are scanned, attached to the transaction (in the accounting software for financial transactions), archived and maintained to facilitate future review.

Management's Response

- 1.6.1.10 *No response.*

Auditor General's Position

- 1.6.1.11 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.6.2 Expenditures without Payment Vouchers and Supporting Documents

Criteria

- 1.6.2.1 Regulation P.9 (2) of the PFM Act of 2009 as Amended and Restated 2019 states that "Payments except for statutory transfers and debt services shall be supported by invoices, bills and other documents in addition to the payment vouchers."

Observation

- 1.6.2.2 During the audit, we selected a sample of transactions from the bank statements and observed that transactions amounting to US\$61,790.00 and L\$4,840,226.14 were not supported by payment vouchers and other relevant supporting documents. **See annexures 2a and 2b.**

Risk

- 1.6.2.3 In the absence of adequate supporting documents, the validity, occurrence, and accuracy of payments may not be assured. This may lead to misappropriation of the entity's funds.
- 1.6.2.4 The absence of adequate supporting documentation for transactions may also lead to fraudulent financial management practices, through the processing and disbursement of illegitimate transactions.
- 1.6.2.5 Management may override the procurement processes by completing disbursement without utilizing the required procurement methods.

Recommendation

- 1.6.2.6 Management should fully account for expenditures per the bank statements disbursed without evidence of payment vouchers and other relevant supporting documents comprehensively catalogued in annexure 2a and 2b below.
- 1.6.2.7 Going forward, Management should ensure all transactions are supported by the requisite supporting documents consistent with the financial management regulations. Documentation such as contracts, invoices, goods received notes, job completion certificates, purchase orders, payment vouchers etc. should be prepared and approved for the procurement of goods and services where applicable. All relevant supporting records should be adequately documented and filed to facilitate future review.
- 1.6.2.8 Additionally, Management should facilitate the operationalization of the electronic document management system by ensuring that all relevant source and supporting documents are scanned, attached to the transaction (in the accounting software for financial transactions), archived and maintained to facilitate future review.

Management's Response

- 1.6.2.9 *No response.*

Auditor General's Position

- 1.6.2.10 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.6.3 Third-Party Payments made to Employees of the Entity

Criteria

- 1.6.3.1 Regulation B.28 of the PFM Act of 2009 as amended and restated 2019 states that "A payment shall be made only to the person or persons named on the payment voucher or to their representatives duly and legally authorized in writing to receive the payment".

Observation

- 1.6.3.2 During the audit, we observed that Management made several payments amounting to US\$19,660 and L\$209,500, to employees of the entity rather than to the service providers or their legally authorized representatives. **Please see Table 4 below for details:**

Table 4: Third-Party Payments made to Employees of the Entity

No.	Date	Voucher No.	Description	Payee	Amount US\$	Amount L\$
1	4/27/2023	439	Vehicle Rental	Matthew D. Jallah		49,500
2	3/6/2023	747	Catering service	Matthew D. Jallah		160,000
3	2/17/2022	676	Reimbursement for fuel	Matthew D. Jallah	800	-
Subtotal					800	-
	8/7/2020	20820	Paid for prequalification evaluation	Hawa J. Kamara	15,300	-
	8/31/2020	50820	Paid for hotel	Hawa J. Kamara	1,560	-
Subtotal					16,860	-
	2/18/2019	70220	Transportation for participants	Hawa J. Kamara	2,000	-
Subtotal					2,000	-
Grand Total					19,660	209,500

Risk

- 1.6.3.3 Paying cash to employees for subsequent disbursement to vendors may facilitate misappropriation of funds.
- 1.6.3.4 This practice may also lead to Management override of the procurement processes by completing disbursement without facilitating due procurement processes.

Recommendation

- 1.6.3.5 Management should initiate and complete all procurement processes as required by the PPC and the Public Financial Management Acts.
- 1.6.3.6 All payments for goods and services procured by the entity should be made directly to the vendor or its legally authorized representative.
- 1.6.3.7 Alternatively, Management should utilize the mobile money platform by transferring funds directly to vendors while maintaining the relevant source and supporting documentations.

Management's Response

- 1.6.3.8 *No response.*

Auditor General's Position

1.6.3.9 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.6.4 No Job Completion Certificates

Criteria

1.6.4.1 Regulation P.9 (2) of the PFM Act of 2009 as amended and restated 2019 states that "Payments except for statutory transfers and debt service shall be supported by invoices, bills and other documents in addition to the payment vouchers".

Observation

1.6.4.2 During the audit, we observed that Management authorized payments for services amounting to US\$103,990 against two service contracts without any evidence of service performed.

1.6.4.3 Additionally, there was no evidence of certificate of completion or partial completion of services. Furthermore, these payments were made to entities that did not provide evidence of Business Registration and Tax Clearance certificates. Procurement processes applied were not supported by documentary evidence and the locations of the businesses could not be physically verified. **See Table 5 below.**

Table 5: No Job Completion Certificates

Date	Check No.	Description	Payee	Amount US\$
10/23/2023	00291216	Legal Strategic Advisory service	HGG Consultants	99,990
1/27/2023	00396674	Development of 5-year strategic Plan	YEP Business Leadership Consultants	4,000
Total				103,990

Risk

1.6.4.4 In the absence of delivery notes, payments may be made for goods not received or the approved quantity and specifications of goods may not be received.

1.6.4.5 In the absence of adequate supporting documents, the validity, occurrence and accuracy of payments may not be assured. This may lead to misappropriation of public funds.

1.6.4.6 The absence of adequate supporting documentation for transactions may also lead to fraudulent financial management practices, through the processing and disbursement of illegitimate transactions.

1.6.4.7 Management may override the procurement processes by completing disbursement without utilizing the required procurement processes.

1.6.4.8 Management may be non-compliant with Regulation P.9 (2) of the PFM Act of 2009 as amended and restated 2019.

Recommendation

1.6.4.9 Management should account for transactions comprehensively catalogued in Table 5 above without job completion certificates, other relevant procurement records and for which the locations of the businesses could not be physically verified.

1.6.4.10 Management should ensure that delivery notes are received for all goods procured to validate that goods paid for including the required specifications were delivered to the end user.

1.6.4.11 Delivery orders should be signed by the vendors, the procurement officer, storeroom officer and an internal auditor/assurance officer.

1.6.4.12 Management should ensure that job completion certificates are submitted by vendors/consultants upon the completion of all services. Management should facilitate the timely review of all completed services against approved specifications/contracts and approve the job completion certificates accordingly.

1.6.4.13 Evidence of delivery notes for all goods received and job completion certificates for all services performed should be adequately documented and filed to facilitate future review.

Management's Response

1.6.4.14 *No response.*

Auditor General's Position

1.6.4.15 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.6.5 Irregularities associated with Travel Expenditures

Criteria

1.6.5.1 Section 29 of the GoL Revised Travel Ordinance 2016/2017 states that "Upon return from abroad, officials are required to submit to the Financial Regulations Unit of the Ministry of Finance and Development Planning, a Travel Settlement Form as per Annexure II and copy of certificates for workshops, seminars, etc., used ticket stubs, copy of passport within 14

days from the date of return from tour or before date of next journey, whichever is earlier. In very exceptional cases where the second granted with the specific written approval of the official concerned, explaining the reasons thereof”.

Observation

1.6.5.2 During the audit, we observed the following irregularities associated with travel expenditures:

- There were several trips made by officials of the LPRA without evidence of Letters of Invitation and other relevant supporting documents to justify the purpose of the trip;
- Incidental allowances were not duly retired/accounted for.
- No receipts for air tickets purchased;
- Total numbers of days designated for travel and applicable rates and allowances were not supported by documentary evidence.
- The processes involved in procuring tickets were not competitive.
- No evidence of travel activities reports for some travel expenditures. **See Table 6 below.**

Table 6: Irregularities associated with Foreign Travel Expenditures

No	Date	Voucher No.	Payee	Amount US\$
1	6/22/2021	100621	Oregon Travel and Tours	17,040.00
2	12/9/2022	680	Jos Travel & Tours	652.00
3	7/14/2023	523	Jos Travel& tours	604.00
Total				18,296.00

Risk

1.6.5.3 Non-compliant with the national travel ordinance or the entity’s approved travel ordinance where applicable may lead to misappropriation of public funds. Travel expenditures may be disbursed above the approved rates.

1.6.5.4 Non-approval of travel expenditure by the relevant authority may facilitate illegitimate travel expenditures.

1.6.5.5 Travel expenditures not appropriately retired/accounted for may lead to misappropriation of the entity’s funds.

1.6.5.6 In the absence of travel activities reports, travel expenditure may be utilized for unapproved activities.

Recommendation

1.6.5.7 Management should account for travel expenditures without adequate supporting documents comprehensively catalogued in Table 6 above.

- 1.6.5.8 Management should ensure that all travels are approved by the relevant authority before commencement of processing of travel expenditures.
- 1.6.5.9 Management should utilize the national travel ordinance for computation of all travel related expenditures. Alternatively, Management should utilize the approved travel ordinance of the entity where applicable. The number of days for the travels and the rates per day should be comprehensively recorded on the payment vouchers and consistent with the relevant travel policy.
- 1.6.5.10 Procurement of air tickets for all travels should be facilitated through competitive procurement processes.
- 1.6.5.11 All incidental allowances should be duly retired/accounted for through the filling and subsequent approval of the travel settlement form. The form should be accompanied by original copies of receipts and travel activities reports to justify the regularity of the transactions.
- 1.6.5.12 Evidence of all travel expenditures records including travel settlement forms, original copies of receipts and travel activities reports should be adequately documented and filed to facilitate future review.

Management's Response

- 1.6.5.13 *No response.*

Auditor General's Position

- 1.6.5.14 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.6.6 Non-Withholding and Remittance of GST

Criteria

- 1.6.6.1 Section 905 (J) and (M) of the Revenue Code of Liberia Act of 2000 states: (j) "within 10 days after the last day of the month, payer described in (a) is required to remit to the tax authorities the total amount required to be withheld during the month", and (m) stipulates "a person who has a withholding obligation under this section and fails to withhold and remit the amount of tax required to be withheld is subject to Section 52 penalty for late payment and failure to pay."

Observation

- 1.6.6.2 During the audit, we observed no evidence of goods & services tax (GST) (2% or 4% for goods, 10% and 15% for service and consultancy of resident and non-resident respectively

and 1% for petroleum products) being withheld and remitted into GoL Revenue Account for the purchase of goods and services.

Risk

- 1.6.6.3 Failure to withhold and remit GST may deny GoL of the much-needed tax revenue.
- 1.6.6.4 Management may be noncompliant with Section (905) J. of the Revenue Code of Liberia 2000, which may result in to penalties for late payment and failure to pay. Please see Section 52 of the Revenue Code of Liberia as referenced above.
- 1.6.6.5 Non-remittance of withholding taxes may lead to an overstatement of the cash book and subsequently the financial statements.

Recommendation

- 1.6.6.6 Management should provide substantive justification for not withholding and remitting GST.
- 1.6.6.7 Going forward, Management should withhold GST on all goods and services procured and facilitate full remittance of GST to the general revenue account in keeping with Section 905 (J) of the Revenue Code of Liberia Act of 2000 as amended in 2011.
- 1.6.6.8 Evidence of remittance including original copies of flag receipts and all other relevant supporting records should be adequately documented and filed to facilitate future review.

Management's Response

- 1.6.6.9 *We withheld from Deloitte & Touché (15%), evidence of payments via LRA are available with LRA receipts #s – 908847 & GRA -878660.*

Auditor General's Position

- 1.6.6.10 Management's assertions were not supported by documentary evidence. Therefore, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.6.7 No Fuel Consumption Policy

Criteria

- 1.1.1.1 Regulations A.3 (1) of the PFM Act of 2009 as amended and restated 2019 states that "Any public officer concerned with the conduct of financial matters of the Government of Liberia, or the receipt, custody and disbursement of public and trust moneys, or for the custody, care and use of government stores and inventories shall keep books of accounts and proper records of all transactions and shall produce the books of accounts and records of the transactions for inspection when called upon to do so by the Auditor-General, the Comptroller General, the relevant internal auditor or any officers authorized by them, by the Minister."

Observation

1.1.1.2 During the audit, we observed no evidence of fuel consumption policy to regulate the procurement, distribution, storage and consumption of fuel of the entity.

Risk

1.1.1.3 Fuel procured may not be based on actual consumption.

1.6.7.1 Management may spend above budgeted allocation and fuel may be subjected to misappropriation or theft.

1.6.7.2 Fuel may be distributed on a discretionary basis, in the absence of a policy.

Recommendation

1.6.7.3 Management should develop, approve and operationalize a policy on fuel distribution, storage, consumption, purchase and ensure that proper records are maintained.

1.6.7.4 Management should maintain fuel consumption and distribution logs to aid the entity manage cost and inform future purchase.

1.6.7.5 Evidence of approved fuel policy and all other fuel procurement, consumption and distribution records should be adequately documented and filed to facilitate future review.

Management's Response

1.6.7.6 *No response.*

Auditor General's Position

1.6.7.7 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.7 Fixed Assets Management

1.7.1 Irregularities Associated with Fixed Assets Management

Criteria

1.7.1.1 Regulations V.4 (2) of the PFM Act of 2009 as amended and restated 2019 states that, "The master inventory shall record under each category of item:

- the date and other details of the voucher or other document on which the items were received or issued;
- their serial numbers where appropriate; and
- their distribution to individual locations and the total quantity held."

Observation

1.7.1.2 During the audit, we observed the following irregularities associated with the entity's Fixed Assets Management System:

- There was no evidence of a fixed assets management policy.
- The fixed assets register did not contain all the relevant columns.
- The fixed assets register was not regularly updated.
- There was no evidence of periodic physical verification of assets by Management.
- There was no evidence of movement of assets form.
- Some fixed assets of the entity were not coded.
- Fixed assets within a given vicinity were not displayed as required by the PFM Act.

See Annexure 3 for details.

Risk

1.7.1.3 Fixed Assets may be misstated (Over/understated).

1.7.1.4 Fixed Assets may be damaged or impaired but their values are still on the books.

1.7.1.5 Fixed Assets may be removed from the entity's premises without authorization, misappropriated, subjected to personal use or theft.

1.7.1.6 The lack of asset movement log may make it difficult to keep track of assigned or transferred assets, which may lead to misuse, loss or theft of assets without being noticed.

1.7.1.7 Failure to properly account for fixed assets may lead to theft and misapplication of equipment. This may result in the non-achievement of the entity's objectives.

1.7.1.8 Fixed Assets not coded may be susceptible to theft or diverted to personal use.

Recommendation

1.7.1.9 Management should develop, approve and operationalize a fixed asset management policy to regulate fixed assets activities of the entity.

1.7.1.10 Management should ensure that the fixed assets register is updated to reflect the following; description, class, code, location, condition, cost, depreciation expense, accumulated depreciation and net book value of the asset.

1.7.1.11 Management should initiate/enforce a systematic fixed assets coding system to ensure all fixed assets are uniquely identified. This control will facilitate the efficient and effective periodic fixed asset verification exercises. Discrepancies in coding identified during verification should be updated in a timely manner.

- 1.7.1.12 Management should conduct periodic fixed assets count and /or verification to determine the current condition and location of the assets. Evidence of physical verification should be adequately documented and filed to facilitate future review.
- 1.7.1.13 The Fixed Assets Register should be updated periodically to reflect all the entity's assets.
- 1.7.1.14 Fixed Assets within a particular vicinity should be clearly displayed as required by the PFM Act.
- 1.7.1.15 A movement of Asset Form should be filled and authorized before assets are moved from one location to another. The Fixed Asset Register should be updated to reflect the change in location of assets.

Management's Response

- 1.7.1.16 *No response.*

Auditor General's Position

- 1.7.1.17 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.8 Revenue Management

1.8.1 Irregularities Associated with Internally Generated Revenue

Criteria

- 1.8.1.1 Regulation O.1.1&2 of the PFM Act of 2009 as restated in 2019 states "(1) All government agencies shall provide in their annual budgetary estimates, their expected revenue collections and internally generated funds. (2) A head of government agency is personally responsible for ensuring that adequate safeguards exist and are applied for the assessment, collection of and accounting for such revenues and other public moneys relating to their agencies, departments or office".

Observation

- 1.8.1.2 During the audit, we observed the following irregularities associated with internally generated revenue:
- No evidence of policy to regulate the projection, collection and recording of internally generated revenue.
 - The internally generated revenue was not comprehensively projected and reported in an internal budget of the entity.
 - No evidence of an automated billing system for the generation of invoices for

internally generated revenue.

- No evidence of periodic internally generated revenue reports.
- No evidence of general ledger of revenue accounts. **See Annexure 4 for details.**

Risk

- 1.8.1.3 Internally generated revenue may be projected, collected and reported on a discretionary basis.
- 1.8.1.4 The completeness and accuracy of revenue may not be assured; therefore, the financial statements may be misstated.
- 1.8.1.5 Management may not fully account for activities/assets of the entity.
- 1.8.1.6 All collections of fees for services may not be deposited in the entity's bank account.
- 1.8.1.7 Internally generated revenue may be susceptible to theft.

Recommendations

- 1.8.1.8 Management should develop, approve and operationalize a policy to regulate the projection, collection and reporting of internally generated revenue. As part of the policy, Management should develop approved fees for service where applicable. Fees for service should be displayed at visible location at centers for the collection of internally generated revenue. Management should also ensure that approved fees for service is consistent with fees charged to customers evidenced by fees reported on invoices and receipts.
- 1.8.1.9 Management should ensure that all sources of internally generated revenue are comprehensively cataloged, projected and reported in the entity's approved internal budget.
- 1.8.1.10 All internally generated revenue should be paid directly by customers in the entity's designated bank accounts.
- 1.8.1.11 Management should perform periodic reconciliation amongst the invoices, receipts, deposit slips and bank statements used in the collection of internally generated revenue. Variances identified should be investigated and adjusted where applicable in a timely manner.
- 1.8.1.12 Management should facilitate the preparation of periodic internally generated revenue collection reports.
- 1.8.1.13 Management should develop general ledger to facilitate comprehensive recording and reporting of all sources of revenue.

- 1.8.1.14 Evidence of approved policy, periodic reconciliation, periodic reports, revenue general ledger and all other relevant supporting records including invoices, receipts, deposit slips and bank statements should be adequately documented and filed to facilitate future review.
- 1.8.1.15 Going forward, Management should procure and operationalize an automated billing system to facilitate comprehensive collection of internally generated revenue. The billing system should be programmed to generate invoices, interfaced with the banking system, and subsequent generation of receipts. Inputs entered into the system by a junior staff should be reviewed and approved by senior personnel before the system generates invoices and receipts. The billing system should also be interfaced with the accounting software (financial reporting systems).

Management's Response

- 1.8.1.16 *No response.*

Auditor General's Position

- 1.8.1.17 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.9 Receivables Management

1.9.1 Irregularities Associated with Account Receivables Management

Criteria

- 1.9.1.1 Regulation A.3 (1) of the PFM Act of 2009 as amended and restated 2019 states that, "Any public officer concerned with the conduct of financial matters of the Government of Liberia, or the receipt, custody and disbursement of public and trust moneys, or for the custody, care and use of government stores and inventories shall keep books of accounts and proper records of all transactions and shall produce the books of accounts and records of the transactions for inspection when called upon to do so by the Auditor-General, the Comptroller General, the relevant internal auditor or any officers authorized by them, by the Minister."
- 1.9.1.2 Regulation M. 3 (C) of the PFM Act of 2009 as restated in 2019 states that "The funds of a State-Owned-Enterprise shall include monies accruing to the enterprise in the exercise and performance of its functions".
- 1.9.1.3 IFRS 9 recognizes that every loan and receivable carries with it some risk of default such that every such asset has an expected loss attached to it from the moment of its origination or acquisition.

1.9.1.4 IFRS 9 allows for trade receivables that do not have a significant financing component to be measured at undiscounted invoice price rather than fair value and also establishes an "expected loss" model that focuses on the risk that a loan or receivable will default rather than whether a loss has been incurred.

1.9.1.5 It therefore requires calculating the allowance for credit losses by considering on a discounted basis the cash shortfalls it would incur in various default scenarios for prescribed future periods.

1.9.1.6 Additionally, IFRS 15-Revenue from Contracts with Customers states that "revenue is recognized when each performance obligation is satisfied".

Observation

1.9.1.7 During the audit, we observed the following irregularities associated with receivable management:

- There was no evidence of account receivables management policy,
- Account receivables were not recorded in a comprehensive, accurate and timely manner,
- There was no evidence of account receivables aging analysis,
- There was no evidence of periodic write-off of significantly overdue receivables.

Risk

1.9.1.8 Receivables may be accrued, collected and written-off on a discretionary basis. This may lead to the under collection or misstatement of receivables.

1.9.1.9 The completeness and accuracy of receivables may not be assured; therefore, the financial statements may be misstated.

1.9.1.10 In the absence of a receivables ageing schedule, receivables may not be reliably monitored, evaluated and collected in a timely manner.

1.9.1.11 Fair presentation and full disclosures may be impaired when receivables are recorded in the wrong accounting period. Receivable balance and subsequently the financial statements may be misstated.

Recommendation

1.9.1.12 Management should develop, approve and operationalize receivables management policy to regulate the recognition, collection, adjustment and management of accounts receivables. The policy should include a specified period for follow-up on debt collection and clearly defined actions to be undertaken at each specified period. The policy should also include

provision for adjustment and write-off of accounts receivables consistent with required regulations (and or IFRS).

- 1.9.1.13 Accounts receivables should be recorded in a comprehensive, accurate and timely manner consistent with the financial reporting framework. Revenue/receivable should be recognized upon issuance of invoice and subsequent completion of service (where applicable). Accounts receivable should be disclosed on the face of the Statement of Financial Position (Balance Sheet).
- 1.9.1.14 Management should establish receivable aging analysis to monitor the age of receivables and implement the specified actions to be taken based on the age of the debt consistent with the receivables management policy. The schedule should contain the following: names of the receivables, address of the receivables, contacts of receivables, date of recognition, initial invoice, payments, additional invoices, current receivables balance, and age grouping.
- 1.9.1.15 Going forward, Management should ensure that current expected credit loss analyses and the Accounts Receivable Aging Analysis are included in the notes to the financial statements. These analyses will enable Stakeholders/Users of the financial statements to ascertain the 'trend' relating to collectability, and correct net realizable value of the trade receivables in the statement of financial position.
- 1.9.1.16 Management should periodically analyze account receivables to identify slow moving and or impaired receivables and adjust/write-off consistent with policy. All receivable write-off should be reviewed and approved by the relevant authority before execution.
- 1.9.1.17 Management should perform periodic reconciliation of receivable balances by reconciling accounts receivable ledgers to customers' statements, receivable confirmation, and the receivable aging analysis. Variances identified should be investigated and adjusted where applicable in a timely manner.

Management's response

- 1.9.1.18 Account *receivable management is being handled appropriately with the necessary methods applied.*

Auditor General's Position

- 1.9.1.19 Management's assertions were not supported by documentary evidence. Copies of approved receivable policy, receivable aging analysis and other relevant receivable records for the periods under audit were not made available for audit purposes as requested. Therefore, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.10 Payable Management

1.10.1 Irregularities Associated Payable Management

Criteria

- 1.10.1.1 Regulation A.3 (1) of the PFM Act of 2009 as amended and restated 2019 states that, "Any public officer concerned with the conduct of financial matters of the Government of Liberia, or the receipt, custody and disbursement of public and trust moneys, or for the custody, care and use of government stores and inventories shall keep books of accounts and proper records of all transactions and shall produce the books of accounts and records of the transactions for inspection when called upon to do so by the Auditor-General, the Comptroller General, the relevant internal auditor or any officers authorized by them, by the Minister."
- 1.10.1.2 Regulation M. 3 (C) of the PFM Act of 2009 as amended and restated 2019 states that "The funds of a State-Owned-Enterprise shall include monies accruing to the enterprise in the exercise and performance of its functions".
- 1.10.1.3 PFM Regulations O.1(Paragraph 3) of the PFM Act of 2009 as amended and restated requires that head of government agency shall ensure that all persons liable to pay revenue are informed of bills, demand notes and other appropriate notices, of debts which are due and that adequate measures are taken to obtain payment.
- 1.10.1.4 Furthermore, Regulations O.21 (Paragraph 1-3) of the PFM Act of 2009 as amended and restated 2019 requires that Government Agency revenue collectors shall keep records of moneys collected in such form as the Comptroller-General may determine and for such periods consistent with the provisions of Regulation 12. The records shall show the persons from whom revenue is due, description of liability, the amount payable, the date, location, receipt number and amount of the collections made. The records shall, wherever possible, be self-balancing and shall be reconciled with the cash collections monthly.

Observation

- 1.10.1.5 During the audit, we observed the following irregularities associated with payable management:
- No evidence of account payable management policy,
 - Accounts payables were not recorded in a comprehensive, accurate and timely manner,
 - No evidence of accounts payables aging analysis,
 - No evidence of periodic review of significantly overdue payables. **See annexure 5.**

Risk

- 1.10.1.6 Payables may be incurred, paid and written-off on a discretionary basis. This may lead to the over payment or misstatement of payables.
- 1.10.1.7 The completeness and accuracy of payables may not be assured; therefore, the financial statements may be misstated.
- 1.10.1.8 In the absence of a payables ageing schedule, payables may not be reliably monitored, evaluated and disbursed in a timely manner.
- 1.10.1.9 Fair presentation and full disclosures may be impaired when payables are recorded in the wrong accounting period. payables balance and subsequently the financial statements may be misstated.

Recommendation

- 1.10.1.10 Management should develop, approve and operationalize payables management policy to regulate the recognition, disbursement, adjustment and management of accounts payables. The policy should include a specified period for follow-up on credit payments and clearly defined actions to be undertaken for prioritizing payments. The policy should also include provision for adjustment and write-off of accounts payables consistent with required regulations.
- 1.10.1.11 Accounts payables should be recorded in a comprehensive, accurate and timely manner consistent with the financial reporting framework.
- 1.10.1.12 Management should establish payables aging analysis to monitor the age of payables and implement the specified actions to be taken based on the age of the credits consistent with the payables management policy. The schedule should contain the following: names of the payees, address of the payees, contacts of payees, date of recognition, initial invoice, payments, additional invoices, current payables balance, and age grouping.
- 1.10.1.13 Management should periodically analyze accounts payables to identify overdue payables and adjust/write-off consistent with policy. All payables write-off should be reviewed and approved by the relevant authority before execution.
- 1.10.1.14 Management should perform periodic reconciliation of payables balances by reconciling accounts payables ledgers to vendors' statements, payables confirmation, and the payables aging analysis. Variances identified should be investigated and adjusted where applicable in a timely manner.

Management's Response

- 1.10.1.15 *Account payable management is being handled appropriately with the necessary methods applied.*

Auditor General's Position

- 1.10.1.16 Management's assertions were not supported by documentary evidence. Copies of approved payable policy, payable aging analysis and other relevant payable records for the periods under audit were not made available for audit purposes as requested. Therefore, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.11 Assurance Management

1.11.1 No Evidence of Approved Internal Audit Charter

Criteria

- 1.11.1.1 Regulation Part J 1(10) of the PFM Act of 2009 as amended and restated 2019 states that "To enhance enforcement of powers and provide the Internal Audit Governance Board with a regulatory operational framework, a Public Sector Internal Audit Charter shall be provided to encompass internal audit mandate, functions and powers of the Internal Audit Governance Board".
- 1.11.1.2 The International Standards for Professional Practice of Internal Auditing Paragraph 1100 states that "the internal audit activity maintained by agencies and ministries must be independent, and internal auditors must be objective in performing their work."
- 1.11.1.3 Regulation J.3 (4b) of the PFM Act of 2009 as amended and restated 2019 states: "(4) Subject to the Public Finance Management Act 2009 or any other enactment, an internal audit unit established under sub regulation (1): shall carry out internal audit of its institution and shall submit reports on the internal audit it carries out in accordance with section 38 (3) and (4) of the Public Finance Management Act 2009; the Internal Audit Governance Board standards and procedures; the Government Agency or Government Organization's accounting and auditing instructions; and International Public Sector Accounting Standards, International Organization of Supreme Audit Institutions (INTOSAI) Standards, and Institute of Internal Auditors Standards as adopted by the Government of Liberia;"

Observation

- 1.11.1.4 During the audit, we observed no evidence of an approved internal audit charter by the board of directors to enhance the independence of the internal auditors at the entity.

Risk

- 1.11.1.5 In the absence of an approved internal audit charter, the independence, objectivity and activities of the Internal Audit Unit may be impaired.

Recommendation

- 1.11.1.6 Management should develop an Internal Audit Charter and submit same to the Board of Directors for subsequent review and approval.
- 1.11.1.7 Subsequently, Management should ensure that the Internal Audit Charter is operationalized to enhance the independence, objectivity and activities of the internal audit function. Evidence of the approved internal audit charter should be adequately documented and filed to facilitate future review.

Management's response

- 1.11.1.8 *No response.*

Auditor General's Position

- 1.11.1.9 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

1.11.2 No Evidence of Internal Audit Plan and Reports

Criteria

- 1.11.2.1 Section 1110 of the International Standards for the Professional Practice of Internal Auditing (Standards) states that "Organizational independence is effectively achieved when the chief audit executive reports functionally to the board. Examples of functional reporting to the board involve the board:
- Approving the internal audit charter.
 - Approving the risk based internal audit plan.
 - Approving the internal audit budget and resource plan.
 - Receiving communications from the chief audit executive on the internal audit activity's performance relative to its plan and other matters.
 - Approving decisions regarding the appointment and removal of the chief audit executive.
 - Approving the remuneration of the chief audit executive.
 - Making appropriate inquiries of management and the chief audit executive to determine whether there are inappropriate scope or resource limitations".

Observation

- 1.11.2.2 During the audit, we observed no evidence of an approved internal audit plan that comprehensively catalog planned activities of the internal audit unit on an annual basis.
- 1.11.2.3 Additionally, we observed no evidence of periodic internal audit reports.

Risk

- 1.11.2.4 Risk assessment activities and periodic internal audits may not be effectively planned for and implemented in a timely manner. This may impair the achievement of the internal audit unit objectives.
- 1.11.2.5 Internal and external audit recommendations may not be follow-up on and implemented in a timely manner.

Recommendation

- 1.11.2.6 The Internal Audit Manager should facilitate the preparation of a comprehensive annual internal audit plan cataloging planned activities of the internal audit function. These activities should include periodic risk assessment, internal audits of selected management functions, and a schedule for follow-up on the implementation of internal and external audit recommendations. The annual internal audit plan should be submitted to the Board of Directors for approval and subsequently operationalized.
- 1.11.2.7 Subsequently, the internal audit unit should facilitate the conduct of periodic risk assessment, internal audits of selected management functions, and follow-up on the implementation of internal and external audit recommendations. Evidence of periodic internal audit reports on activities mentioned above should be adequately documented and filed to facilitate future review.

Management's Response

- 1.11.2.8 *No response.*

Auditor General's Position

- 1.11.2.9 In the absence of a response by Management, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

ANNEXURES

ANNEXURE 1: Payment without evidence of adequate supporting documentation

No	Date	Voucher No.	Description	Payee	Amount USD	Amount LRD	Comment
	26/09/2023	689	Paid For smart systems	Smart systems	14,122.14		No business Registration No tax Clearance, No certificate of Completion
	19/07/2023	524	paid for legal Retainer fee	Detho &partners	2,000		No Business Registration, No tax Clearance
	02/06/2023	494	paid for legal Retainer fee	Detho &partners	-	340,000	No Business Registration, No tax Clearance
	02/05/2023	447	paid For legal Retainer fee	Detho &partners	1,000	-	No Business Registration, No tax Clearance
	04/10/2023	604	paid For legal Retainer fee	3D Creators	9,600	-	No business Registration No tax Clearance, No contract, No procurement document, No certificate of Completion
	04/10/2023	605	Vehicle rental	SMART Enterprises	5,400	-	No business registration and Tax clearance certificate
	19/04/2023	429	Paid For smart systems	Smart systems	3,500	-	No business Registration No tax Clearance, No certificate of Completion
	02/05/2023	494	Paid for sanitary material s for Covid	Blue Graphics	-	400,000	No business Registration No tax Clearance, No contract, No procurement document, No delivery notes
	15/08/2023	533	paid for internet Subscription	GOWIFI	1121.26		No business Registration No tax Clearance, No certificate of Completion
	TOTAL				36,743.40	740,000	

*Draft Management Letter On
The Compliance Audit of the Liberia Petroleum Regulatory Authority
For the period July1, 2018 to December 31, 2023.*

No	Date	Voucher No.	Description	Payee	Amount USD	Amount LRD	Comment
	12/04/2022	71	Paid to Repair 75 KVA Generator	Sunrise Electrical and mechanical ENG	3,550		No business Registration No tax Clearance, No contract, No procurement document, No certificate of Completion
	02/12/2022	325	paid For legal Retainer fee	Detho &partners	1,000	-	No business Registration No tax Clearance, No certificate of Completion
	12/04/2022	70	Paid For smart systems	Smart systems	5,000	-	No business Registration No tax Clearance, No certificate of Completion
	11/03/2022	30	Paid For smart systems	Smart systems	2,200	-	No business Registration No tax Clearance, No certificate of Completion
	TOTAL				11,750		
	22/06/2021	18061	Paid to overhaul 75 KVA Generator	Sunrise Electrical and mechanical ENG	6,890		No business Registration No tax Clearance, No contract, No procurement document, No certificate of Completion
	30/09/2020	110920	Paid to repair vehicles	Dolphins Inc	7,500		No business Registration No tax Clearance, No contract, No procurement document, No certificate of Completion,
	03/07/2020	80721	Paid for fumigation Services	Prompt Ventures		800,000	No business Registration No tax Clearance, No contract, No procurement document, No certificate of Completion
	TOTAL				14,390	800,000	

*Draft Management Letter On
The Compliance Audit of the Liberia Petroleum Regulatory Authority
For the period July1, 2018 to December 31, 2023.*

No	Date	Voucher No.	Description	Payee	Amount USD	Amount LRD	Comment
	17/03/2020	200320	paid to Conduct Market Survey	Vantage Group	7,902	-	No business Registration No tax Clearance, No certificate of Completion
	02/03/2020	20320	Paid to Draft Regulation	Detho &partners	6,000	-	No business Registration No tax Clearance, No certificate of Completion
	17/03/2020	270320	paid to Conduct Market Survey	Vantage Group	1,975.00	-	No business Registration No tax Clearance, No contract, No procurement document, No certificate of Completion
	TOTAL				15,877		
	22/07/2019	N/A	paid to Technical Consultants	George Gontor, Matthew B. Doken. Urias Taylor	-	363,398	No business Registration No tax Clearance, No evidence of service Delivery
	07/10/2019	61019	Paid for renovation	Dolphins Inc	4,300		
	TOTAL				4,300	363,398	
	06/06/2019	N/A	paid for Domain Reg. & Website	Stargate Technology	800	-	No business registration No tax Clearance, No certificate of Completion
	26/06/2019	No PV number	Vehicle rental	GAP Business	1,500	-	No business, no tax clearance
	TOTAL				2300	-	
GRAND TOTAL					85,360.4	1,903,398.00	

Annexure 2a Expenditures without Payment Vouchers and Supporting Documents

LIBERIA PETROLEUM REGULATORY AUTHORITY (IBLL LRD a/c No: 00121911054130201)							
TRANSACTIONS WITHOUT PAYMENT VOUCHERS or SUPPORTING DOCUMENTS							
REF NO	Tran Date	Value Date	Mode	Description	Cheque No	Debit	
	01-Jul-2018	01-Jul-2018		Opening Balance			
4811	10-Jul-2018	10-Jul-2018	Csh	PMT IFO ISELLA COOPER	9	790,750.00	
4286	11-Jul-2018	11-Jul-2018	Trf	IN HOUSE CK.PMT TO FODEE KROMAH ON CK/10 Transfer to PAYNESVILLE A/c No. [00121911054130201 to 00821661073130101]	10	316,300.00	
9111	06-Aug-2018	06-Aug-2018	Clg	J MART INC/00000013 /INW CLG ACP ACH/00121911054130201	13	244,848.80	
9113	06-Aug-2018	06-Aug-2018	Clg	J MART INC/00000014 /INW CLG ACP ACH/00121911054130201	14	41,510.00	
1991	08-Aug-2018	08-Aug-2018	Clg	AFRICA MOTORS/00000011 /INW CLG ACP ACH/00121911054130201	11	121,118.72	
5063	14-Aug-2018	14-Aug-2018	Trf	PMT TO DAVID B DAHN ON CK 15 Cash Withdrawal from [PAYNESVILLE acc/no. 00121911054130201]	15	30,760.00	
11549	14-Aug-2018	14-Aug-2018	Clg	J MART INC/00000017 /INW CLG ACP ACH/00121911054130201	17	189,230.58	
7466	15-Aug-2018	15-Aug-2018	Clg	THE INDEPENDENT NEWSPAPER/00000016 /INW CLG ACP ACH/00121911054130201	16	46,109.61	
8633	22-Aug-2018	22-Aug-2018	Csh	PMT IFO M.D. JALLAH	20	77,594.00	
8675	22-Aug-2018	22-Aug-2018	Csh	PMT IFO DAVID B DAHN	21	77,594.00	
8715	22-Aug-2018	22-Aug-2018	Csh	PMT IFO URIAS S GOLL	23	77,594.00	
10149	22-Aug-2018	22-Aug-2018	Trf	PMT IFO FABIAN M LAI	22	77,594.00	
1638	23-Aug-2018	23-Aug-2018	Csh	CHK. PMT IFO EDWARD R. A.	18	77,594.00	

*Draft Management Letter On
The Compliance Audit of the Liberia Petroleum Regulatory Authority
For the period July1, 2018 to December 31, 2023.*

LIBERIA PETROLEUM REGULATORY AUTHORITY (IBLL LRD a/c No: 00121911054130201)							
TRANSACTIONS WITHOUT PAYMENT VOUCHERS or SUPPORTING DOCUMENTS							
REF NO	Tran Date	Value Date	Mode	Description	Cheque No	Debit	
				SMITH			
4376	27-Aug-2018	27-Aug-2018	Csh	IB CHK- 28 PMT IFO MATHEW D. JALLAH	28	38,500.00	
7226	27-Aug-2018	27-Aug-2018	Trf	IN-HOUSE CK PMT TO FODEE KROMAH ON CK 24 Transfer to PAYNESVILLE A/c No. [00121911054130201 to 00821661073130101]	24	462,000.00	
8056	04-Sep-2018	04-Sep-2018	Clg	RUFUS TARNUE/00000019 /INW CLG ACP ACH/00121911054130201	19	77,594.00	
8058	04-Sep-2018	04-Sep-2018	Clg	RUFUS TARNUE/00000027 /INW CLG ACP ACH/00121911054130201	27	38,500.00	
4126	05-Sep-2018	05-Sep-2018	Csh	CHK PMT IFO DAVID B DAHN	26	38,500.00	
4960	17-Sep-2018	17-Sep-2018	Trf	CK PMT IFO IDELLA COOPER	25	308,000.00	
3782	24-Sep-2018	24-Sep-2018	Csh	PMT IFO MATHEW JALLAH	33	116,259.30	
3786	24-Sep-2018	24-Sep-2018	Trf	ck pmt ifo fabian m. lai	35	77,506.20	
3911	24-Sep-2018	24-Sep-2018	Csh	PMT IFO EDWARD R.A. SMITH	31	77,506.20	
966	25-Sep-2018	25-Sep-2018	Csh	PMT IFO JERROR TARWO	37	77,506.20	
2344	25-Sep-2018	25-Sep-2018	Csh	PMT IFO DAVID B. DAHN	36	116,259.30	
8185	25-Sep-2018	25-Sep-2018	Clg	RUFUS TARNUE/00000032 /INW CLG ACP ACH/00121911054130201	32	116,259.30	
5924	26-Sep-2018	26-Sep-2018	Csh	PMT IFO URIAS S. GOLL	34	77,506.20	
7918	27-Sep-2018	27-Sep-2018	Clg	AFRICA MOTORS/00000030 /INW CLG ACP ACH/00121911054130201	30	27,902.23	
1086	01-Oct-2018	01-Oct-2018	Csh	PMT IFO EDMURD PONPON	38	46,800.00	
3110	02-Oct-2018	02-Oct-2018	Csh	PMT IFO WELLA COOPER	39	31,200.00	

Draft Management Letter On
 The Compliance Audit of the Liberia Petroleum Regulatory Authority
 For the period July1, 2018 to December 31, 2023.

LIBERIA PETROLEUM REGULATORY AUTHORITY (IBLL LRD a/c No: 00121911054130201)						
TRANSACTIONS WITHOUT PAYMENT VOUCHERS or SUPPORTING DOCUMENTS						
REF NO	Tran Date	Value Date	Mode	Description	Cheque No	Debit
4697	25-Oct-2018	25-Oct-2018	Csh	PMT IFO EDMUND PONPON	42	46,947.00
4998	25-Oct-2018	25-Oct-2018	Csh	PMT IFO MATTHEW D JALLAH	44	117,367.50
515	26-Oct-2018	26-Oct-2018	Csh	CHK. PMT IFO DAVID B. DAHN	45	117,367.50
1549	26-Oct-2018	26-Oct-2018	Csh	PMT IFO JERROR TARWO	41	78,245.00
1126	27-Oct-2018	27-Oct-2018	Csh	CHK. PMT IFO EDWARD R. A. SMITH	46	78,245.00
10206	29-Oct-2018	29-Oct-2018	Clg	RUFUS TARNUE/00000043 /INW CLG ACP ACH/00121911054130201	43	117,367.50
10218	29-Oct-2018	29-Oct-2018	Clg	FABIAN M LAI/00000040 /INW CLG ACP ACH/00121911054130201	40	78,245.00
7967	28-Nov-2018	28-Nov-2018	Trf	PMT. IFO EDMUND PONPON Cash Withdrawal from [SINKOR acc/no. 00121911054130201]	50	47,610.00
8700	28-Nov-2018	28-Nov-2018	Csh	CK PMT IFO URIAS GOLL	48	50,000.00
8730	28-Nov-2018	28-Nov-2018	Csh	CK PMT IFO EMMANUEL TARWO	49	79,350.00
4260	13-Dec-2018	13-Dec-2018	Trf	PMT IFO SOUTH (MOBILE(LIBERIA)INC	52	133,085.00
TOTAL						4,840,226.14

ANNEXURE 2b: Expenditures without Payment Vouchers and Supporting Documents

ANNEXURE 2b (IBLL USD a/c No: 00121971054130102)						
LIBERIA PETROLEUM REGULATORY AUTHORITY						
TRANSACTIONS WITHOUT PAYMENT VOUCHERS or SUPPORTING DOCUMENTS						
REF NO	Tran Date	Value Date	Mode	Description	Cheque No	Debit (USD)
	01-Jul-2018	01-Jul-2018		Opening Balance		
6066	30-Jul-2018	30-Jul-2018	Csh	PAY TO URIS S GOLL	25	1,500.00

Draft Management Letter On
The Compliance Audit of the Liberia Petroleum Regulatory Authority
For the period July1, 2018 to December 31, 2023.

ANNEXURE 2b (IBLL USD a/c No: 00121971054130102)						
LIBERIA PETROLEUM REGULATORY AUTHORITY						
TRANSACTIONS WITHOUT PAYMENT VOUCHERS or SUPPORTING DOCUMENTS						
6084	30-Jul-2018	30-Jul-2018	Csh	PAY TO EDWARD R.A SMITH	20	2,500.00
6106	30-Jul-2018	30-Jul-2018	Csh	PMT IFO DAVID B. DAHN	23	1,750.00
6110	30-Jul-2018	30-Jul-2018	Csh	PAY TO URIS S GOLL	19	1,500.00
6142	30-Jul-2018	30-Jul-2018	Csh	PMT IFO MATHEW D. JALLAH	22	1,750.00
261	01-Aug-2018	01-Aug-2018	Csh	PMT IFO FABIAN M LAI CHK#024	24	1,500.00
1990	01-Aug-2018	01-Aug-2018	Csh	PMT IFO RUFUS TARNUE	21	1,750.00
2044	01-Aug-2018	01-Aug-2018	Csh	PMT IFO RUFUS TARNUE	15	1,750.00
7753	01-Aug-2018	01-Aug-2018	Csh	PMT IFO FODEE KROMAH	26	2,000.00
7235	22-Aug-2018	22-Aug-2018	Trf	PMT IFO FABIAN M LAI	31	1,000.00
7291	22-Aug-2018	22-Aug-2018	Csh	PMT IFO URIAS S GOLL	32	1,000.00
7316	22-Aug-2018	22-Aug-2018	Csh	PMT IFO MATHEW D JALLAH	29	1,000.00
7385	22-Aug-2018	22-Aug-2018	Csh	PMT IFO EDWARD R.A. SMITH	27	2,000.00
7516	22-Aug-2018	22-Aug-2018	Csh	PMT IFO DAVID B. DAHN	30	1,000.00
12232	31-Aug-2018	31-Aug-2018	Clg	RUFUS TARNUE/00000028 /INW CLG ACP ACH/00121971054130102	28	1,000.00
3696	24-Sep-2018	24-Sep-2018	Csh	PMT FIO MATHHEW JALLAH	36	1,000.00
3723	24-Sep-2018	24-Sep-2018	Trf	PMT IFO FABIAN M LAI	37	1,000.00
2189	25-Sep-2018	25-Sep-2018	Csh	PMT IFO RUFUS TARNUE	35	1,000.00
2282	25-Sep-2018	25-Sep-2018	Csh	PMT IFO DAVID B. DAHN	38	1,000.00
3089	25-Sep-2018	25-Sep-2018	Csh	PMT IFO EDWARD SMITH	34	2,000.00
5981	26-Sep-2018	26-Sep-2018	Csh	PMT IFO URIAS S GOLL	39	1,000.00
8992	26-Sep-2018	26-Sep-2018	Clg	SOLID ROCK LOGISTICS/00000033 /INW CLG ACP ACH/00121971054130102	33	1,120.00
6350	01-Oct-2018	01-Oct-2018	Csh	PMT IFO RUFUS TARNUE	40	500.00
4630	25-Oct-2018	25-Oct-2018	Csh	PMT IFO DAVID B DAHN	46	75.00
4636	25-Oct-2018	25-Oct-2018	Csh	PMT IFO MATTHEW D JALLAH	43	1,000.00
4642	25-Oct-2018	25-Oct-2018	Csh	PMT IFO DAVID B DAHN	42	1,000.00
842	26-Oct-2018	26-Oct-2018	Csh	PMT INFO RUFUS TARNUE	44	1,000.00

Draft Management Letter On
The Compliance Audit of the Liberia Petroleum Regulatory Authority
For the period July1, 2018 to December 31, 2023.

ANNEXURE 2b (IBLL USD a/c No: 00121971054130102)						
LIBERIA PETROLEUM REGULATORY AUTHORITY						
TRANSACTIONS WITHOUT PAYMENT VOUCHERS or SUPPORTING DOCUMENTS						
3602	26-Oct-2018	26-Oct-2018	Csh	PMT IFO EDWARD R A SMITH	45	2,000.00
10305	29-Oct-2018	29-Oct-2018	Clg	FABIAN M LAI/00000041 /INW CLG ACP ACH/00121971054130102	41	1,000.00
7733	28-Nov-2018	28-Nov-2018	Csh	CK PMT IFO RUFUS TARNUE	48	1,750.00
7844	28-Nov-2018	28-Nov-2018	Csh	CK PMT IFO ARCHIE DONMO	47	2,500.00
7937	28-Nov-2018	28-Nov-2018	Csh	CK PMT IFO DAVID B DAHN	51	1,750.00
8176	28-Nov-2018	28-Nov-2018	Csh	CK PMT IFO MATTHWE D JALLAH	50	1,750.00
1154	22-Dec-2018	22-Dec-2018	Trf	Charges deducted for OverDraft for Acc/No.[00121971054130102].		240.00
1281	22-Dec-2018	22-Dec-2018	Csh	CK PMT IFO JERROR EMMANUEL TARWE	64	500.00
1291	22-Dec-2018	22-Dec-2018	Csh	CK PMT IFO ARCHIE N DONMO	53	3,500.00
1348	22-Dec-2018	22-Dec-2018	Trf	PMT IFO MONEH CLINTON Cash Withdrawal from [DUCOR acc/no. 00121971054130102]	62	200.00
1490	22-Dec-2018	22-Dec-2018	Trf	PMT IFO SEDEKIE M KAMARA Cash Withdrawal from [SINKOR acc/no. 00121971054130102]	61	200.00
1524	22-Dec-2018	22-Dec-2018	Csh	CK PMT IFO MATTHEW D JALLAH	54	1,750.00
1580	22-Dec-2018	22-Dec-2018	Csh	PMT IFO MATHEW D JALLAH		500.00
2881	22-Dec-2018	22-Dec-2018	Csh	PMT IFO IDELLA COOPER	63	500.00
3166	22-Dec-2018	22-Dec-2018	Trf	PMT IFO EDMUND PONPON Cash Withdrawal from [SINKOR acc/no. 00121971054130102]	58	300.00
5029	26-Dec-2018	26-Dec-2018	Trf	CHK FROM CLEARING; 24/12/18	55	1,750.00
3979	28-Dec-2018	28-Dec-2018	Csh	PMT IFO JOSEPH A FLOMO	60	200.00
4318	28-Dec-2018	28-Dec-2018	Trf	INHOUSE CK PMT INFO FABIAN M LAI Transfer to BROAD STREET A/c No. [00121971054130102 to	57	1,500.00

Draft Management Letter On
The Compliance Audit of the Liberia Petroleum Regulatory Authority
For the period July1, 2018 to December 31, 2023.

ANNEXURE 2b (IBLL USD a/c No: 00121971054130102)						
LIBERIA PETROLEUM REGULATORY AUTHORITY						
TRANSACTIONS WITHOUT PAYMENT VOUCHERS or SUPPORTING DOCUMENTS						
				00121780854380102]		
4350	28-Dec-2018	28-Dec-2018	Trf	INHOUSE CK PMT INFO DAVID B DAHNS Transfer to BROAD STREET A/c No. [00121971054130102 to 00121791091910302]	56	1,750.00
		TOTAL				58,335.00
ECOBANK a/c No: 6100063282						
Eco Bank chk #00966790	26-June-19			Payment for five days Perdiem		375.00
Eco Bank chk#09966710	9-May-19			Payment of stationary and supplies		555.00
Eco Bank chk#09966799	9-May-19			Payment of stationary and supplies		2,525.00
TOTAL						3,455.00
Grand TOTAL						US \$61,790

ANNEXURE 3: Irregularities associated with Fixed Assets Management

No.	Asset Code	Asset Category	Sub-Category	Asset Description	Serial #	Purchase Order #	Purchase Order Type	Date Purchased	DATE OF PURCHASE	COST	Depreciation	Condition	Auditor's Comments
25	GSA/LPRA/DDGO/001-18	Furniture	Desk	EXECUTIVE DESK	BUMERANG		N/A	LOCAL	N/A	N/A	N/A	Good	Damaged
58	GSA/LPRA/DG/CNT/00	Furniture	Chair	Executive Chair			N/A	LOCAL		N/A	N/A	Excellent	Damaged

*Draft Management Letter On
The Compliance Audit of the Liberia Petroleum Regulatory Authority
For the period July1, 2018 to December 31, 2023.*

No.	Asset Code	Asset Category	Sub-Category	Asset Description	Serial #	Purchase Order #	Purchase Order Type	Date Purchased	DATE OF PURCHASE	COST	Depreciation	Condition	Auditor's Comments
	1-40												
60	GSA/LPRA/DG/CNT/001-42	Furniture	Chair	NM			N/A	LOCAL		N/A	N/A	Excellent	Damaged
74	GSA/LPRA/CFR/001-54	Furniture	Desk	LONG CONFERENCE TABLE			N/A	LOCAL		N/A	N/A	Excellent	DAMAGE
77	GSA/LPRA/CFR/001-56	Furniture	Chair	VISITOR ARM CHAIR			N/A	LOCAL		N/A	N/A	Excellent	DAMAGE
83	GSA/LPRA/DDGA/SEC/001-59	Furniture	Chair	OFFICE CHAIR			N/A	LOCAL		N/A	N/A	Excellent	DAMAGED
98	GSA/LPRA/DG/CFO/006-05	Office Equipment		PAPER CUTTER			N/A	LOCAL		N/A	N/A	Good	Damage
107	GSA/LPRA/DG/M&C/001-77	Furniture	Chair	EXECUTIVE DESK			N/A	LOCAL		N/A	N/A	Excellent	DAMAGED
110	GSA/LPRA/DG/M&C/003-06	Computer	Laptop	HP LAPTOP			N/A	LOCAL		N/A	N/A	Excellent	DAMAGE

*Draft Management Letter On
The Compliance Audit of the Liberia Petroleum Regulatory Authority
For the period July1, 2018 to December 31, 2023.*

No.	Asset Code	Asset Category	Sub-Category	Asset Description	Serial #	Purchase Order #	Purchase Order Type	Date Purchased	DATE OF PURCHASE	COST	Depreciation	Condition	Auditor's Comments
39	GSA/LPRA/DDGT/ 003-04	Computer	Laptop	THINKPAD LENOVA		S/N PF= 19JJVB	N/A	LOCAL		N/A	N/A	Excellent	NOT TAGGED AND DAMAGED
ASSETS NOT TAGGED													
116	GSA/LPRA/DDGO/BAR/ 001-84	Furniture	Chair	4PCS PLASTIC CHAIR			N/A	LOCAL		N/A	N/A	Excellent	NOT TAGGED
118	GSA/LPRA/FN/TREASURY/003-08	Computer	Laptop	Dell Laptop	Inspiron 15	H4QY4C2	N/A	LOCAL		N/A	N/A	Excellent	NOT TAGGED
130	GSA/LPRA/CFR/001-88	Furniture	Table	MEETING TABLE 110*300 CEVIZ	MT13 3.0	TG1MT14	N/A	LOCAL	27-Oct-23	N/A	N/A	Excellent	NOT TAGGED
131	GSA/LPRA/CFR/ 001-89	Furniture	Filing Cabinet	GLASS MID-HEIGHT CABINET	MYL15	TG1CAB15	N/A	LOCAL	27-Oct-23	N/A	N/A	Excellent	NOT TAGGED
132	GSA/LPRA/CFR/001-90	Furniture	Chair	VISITOR ARM CHAIR	BONITO L255LCA	XF1VAC12	N/A	LOCAL	27-Oct-23	N/A	N/A	Excellent	NOT TAGGED

*Draft Management Letter On
The Compliance Audit of the Liberia Petroleum Regulatory Authority
For the period July1, 2018 to December 31, 2023.*

No.	Asset Code	Asset Category	Sub-Category	Asset Description	Serial #	Purchase Order #	Purchase Order Type	Date Purchased	DATE OF PURCHASE	COST	Depreciation	Condition	Auditor's Comments
133	GSA/LPRA/CFR/001-91	Furniture	Chair	VISITOR ARM CHAIR	BONITO L255LCA	XF1VAC12	N/A	LOCAL	27-Oct-23	N/A	N/A	Excellent	NOT TAGGED
134	GSA/LPRA/CFR/001-92	Furniture	Chair	VISITOR ARM CHAIR	BONITO L255LCA	XF1VAC12	N/A	LOCAL	27-Oct-23	N/A	N/A	Excellent	NOT TAGGED
135	GSA/LPRA/CFR/001-93	Furniture	Chair	VISITOR ARM CHAIR	BONITO L255LCA	XF1VAC12	N/A	LOCAL	27-Oct-23	N/A	N/A	Excellent	NOT TAGGED
136	GSA/LPRA/CFR/001-94	Furniture	Chair	VISITOR ARM CHAIR	BONITO L255LCA	XF1VAC12	N/A	LOCAL	27-Oct-23	N/A	N/A	Excellent	NOT TAGGED
137	GSA/LPRA/CFR/001-95	Furniture	Chair	VISITOR ARM CHAIR	BONITO L255LCA	XF1VAC12	N/A	LOCAL	27-Oct-23	N/A	N/A	Excellent	NOT TAGGED
138	GSA/LPRA/CFR/001-96	Furniture	Chair	EXECUTIVE HIGH BACK CHAIR	BONITO L272LCA	XF1HBC21	N/A	LOCAL	27-Oct-23	N/A	N/A	Excellent	NOT TAGGED

*Draft Management Letter On
The Compliance Audit of the Liberia Petroleum Regulatory Authority
For the period July1, 2018 to December 31, 2023.*

No.	Asset Code	Asset Category	Sub-Category	Asset Description	Serial #	Purchase Order #	Purchase Order Type	Date Purchased	DATE OF PURCHASE	COST	Depreciation	Condition	Auditor's Comments
139	GSA/LPRA/LOBBY/001-97	Furniture	Chair	2 SEATED PUBLIC SEATING STEAL	GY-A8201P2	GY1LC11	N/A	LOCAL	27-Oct-23	N/A	N/A	Excellent	NOT TAGGED
140	GSA/LPRA/LOBBY/001-98	Furniture	Chair	3 SEATED PUBLIC SEATING BLK-CHROME	GY-GO3F	GY1LC15	N/A	LOCAL	27-Oct-23	N/A	N/A	Excellent	NOT TAGGED
141	GSA/LPRA/LOBBY/001-99	Furniture		SQY CARPET FRIESE MARROUN	RIYAD 813	NS3CPC05	N/A	LOCAL	27-Oct-23	N/A	N/A	Excellent	NOT TAGGED
145	GSA/LPRA/DG/ICT/003-13	Computer	Laptop	Lenova Laptop	S1CARBON	PF117884	N/A	LOCAL					NOT TAGGED
26	GSA/LPRA/DDGO/001-19	Furniture	Chair	EXECUTIVE CHAIR			N/A	LOCAL		N/A	N/A	Excellent	NO TAGGED
33	GSA/LPRA/DDGT/001-23	Furniture	Chair	EXECUTIVE CHAIR			N/A	LOCAL		N/A	N/A	Excellent	NO TAGGED
19	GSA/LPRA/DDGA/001-	Furniture	Chair	EXECUTIVE			N/A	LOCAL		N/A	N/A	Excellent	not tagged

Draft Management Letter On
 The Compliance Audit of the Liberia Petroleum Regulatory Authority
 For the period July1, 2018 to December 31, 2023.

No.	Asset Code	Asset Category	Sub-Category	Asset Description	Serial #	Purchase Order #	Purchase Order Type	Date Purchased	DATE OF PURCHASE	COST	Depreciation	Condition	Auditor's Comments
	15			CHAIR									d but code d
79	GSA/LPRA/DDGO/MTN/002-13	Appliance	Air Conditioner	TCL 12000 BTU			N/A	LOCAL		N/A	N/A	Excellent	NOT CODED AND TAGGED
CODED BUT NOT SEEN													
17	GSA/LPRA/DG/001-13	Furniture	Chair	VISITOR ARMCHAIR			N/A	LOCAL		N/A	N/A	Excellent	Code not seen
ASSETS NOT CODED													
24	GSA/LPRA/DDGA/003-02	COMPUTER	Laptop	THINKPAD LENOVA		SN/PF/1986A B	N/A	LOCAL		N/A	N/A	Excellent	not code d

ANNEXURE 4: Irregularities associated with Internally Generated Revenue

Liberia Petroleum Regulatory Authority (LPRA)									
TOTAL REVENUE SUMMARY									
Date	Bank	Reference	Institutions/organizations	Description	Amount (LRD)	Amount (USD)	Bank(USD)	Bank(LRD)	Variance
CANADIAN GLOBAL ENERGY									
28-Jan-23	IBLL	3917	Canadian Global Energy	Prequalification	-	50,000.00	50,000.00		-
25-Sep-23	Ecobank	681028	Canadian Global Energy	Reconnaissance license-Block 26	-	150,000.00	150,000.00		-
25-Sep-23	Ecobank	681029	Canadian Global Energy	Reconnaissance license-Block 30	-	150,000.00	150,000.00		-
25-Sep-23	Ecobank	681030	Canadian Global Energy	Reconnaissance license-Block 31	-	150,000.00	150,000.00		-
TOTAL						500,000.00	500,000.00		-
EXXON MOBIL									
22-Mar-23	Ecobank		Exxonmobil	Prequalification	-	50,000.00	50,000.00		-
LOCAL BIDDER									
29-Jun-20	IBLL	5759	WENTO	Prequalification	-	5,000.00	5,000.00		-
3-Jul-20	IBLL	3627	GARBLA VINCENT WILLIAMS	Prequalification	990,443.00	-		990,443.00	-
29-Jul-20	IBLL	3817	TRF 00121971054130102]	Prequalification	-	5,000.00	5,000.00		-
30-Jul-20	IBLL	3551	BCE&CCGI	Prequalification	-	5,000.00	5,000.00		-

Draft Management Letter On
The Compliance Audit of the Liberia Petroleum Regulatory Authority
For the period July1, 2018 to December 31, 2023.

Liberia Petroleum Regulatory Authority (LPRA)									
TOTAL REVENUE SUMMARY									
Date	Bank	Reference	Institutions/ rganizations	Description	Amou nt (LRD)	Amount (USD)	Bank(USD)	Bank(LRD)	Varianc e
30-Jul-20	IBLL	4481	MAC-AFRICA PETROLEUM INC .	Prequalification	-	5,000.00	5,000.00		-
31-Jul-20	IBLL	855	DEMUS EXPLORATION AND PRODUCTION	Prequalification	-	5,000.00	5,000.00		-
3-Aug-20	IBLL	4659	JUNGLE ENERGY POWER	Prequalification	-	5,000.00	5,000.00		-
23-Apr-21	IBLL	462	AMNATA & SONS INC	Prequalification	-	5,000.00	5,000.00		-
6-May-21	IBLL	3746	KARDINAL GROUP OF COMPANIES	Prequalification	-	5,000.00	5,000.00		-
26-May-21	IBLL	1620	THOMAS N. WOART	Prequalification	-	5,000.00	5,000.00		-
TOTAL					990,443.00	45,000.00	45,000.00	990,443.00	-
TGS NOPEC									
21-Feb-20	IBLL	2886/2884	TGS NOPEC GEOPHYSICAL CO. ASA	Prequalification	-	25,224.75	25,224.75		-
9-Jul-21	IBLL	2886/2884	TGS NOPEC GEOPHYSICAL COMPANY ASA	N/A	-	50,465.24	50,465.24		-
						75,689.99	75,689.99		-
DEECO									
23-Sep-	Ecob		License fees	License			30,000.00		

Draft Management Letter On
The Compliance Audit of the Liberia Petroleum Regulatory Authority
For the period July1, 2018 to December 31, 2023.

Liberia Petroleum Regulatory Authority (LPRA)									
TOTAL REVENUE SUMMARY									
Date	Bank	Reference	Institutions/ rganizations	Description	Amou nt (LRD)	Amount (USD)	Bank(USD)	Bank(LRD)	Varianc e
20	ank		DEECO		-	30,000.00			-
30-Jul-19	Ecobank	GT Bank Check #: 53-61000063282	DECCO LTD	Recognnaise license	-	50,000.00	50,000.00		-
TOTAL						80,000.00	80,000.00		-
NOCAL									
23-Jan-19	Ecobank		NOCAL	Operations	-	75,000.00	75,000.00		-
19-Feb-20	Ecobank		NOCAL	Operations		10,000.00	10,000.00		-
TOTAL						85,000	85,000		

Annexure 5: Irregularities Associated with Payable Management

Liberia Petroleum Regulatory Authority							
LIBTELLCO Building, 18th Street, Sinkor							
Monrovia, Liberia							
LPRA Liability Listing - February 16, 2024							
<i>Internal</i>							
S/N	Names of Staff	Legacy Arrears	Leave Arrears	Total	1st Pmt	2nd Pmt	Balance
1	David Dahn	19,564.19	19,031.87	38,596.06	-	5,000.00	33,596.06
2	Fabian M. Lai	21,908.00	5,204.46	27,112.46	5,000.00	-	22,112.46

Draft Management Letter On
The Compliance Audit of the Liberia Petroleum Regulatory Authority
For the period July1, 2018 to December 31, 2023.

Liberia Petroleum Regulatory Authority							
LIBTELLCO Building, 18th Street, Sinkor							
Monrovia, Liberia							
LPRA Liability Listing - February 16, 2024							
<i>Internal</i>							
3	Urias S. Goll	22,908.00	-	22,908.00	5,000.00	-	17,908.00
4	Rufus Tarnue	25,115.48	-	25,115.48	10,000.00	4,000.00	11,115.48
5	Mathew Jallah	21,615.48	-	21,615.48	10,000.00	4,000.00	7,615.48
6	Dr. Kromah	3,900.00	-	3,900.00	1,500.00	-	2,400.00
7	Idella Cooper	15,825.00	-	15,825.00	10,000.00	3,500.00	2,325.00
8	Mendy McGee	3,330.00	-	3,330.00	1,665.00	500.00	1,165.00
9	Armah Kollie	3,040.00	-	3,040.00	1,520.00	400.00	1,120.00
10	Hawa J. Kamara	3,040.00	-	3,040.00	1,520.00	400.00	1,120.00
11	Willite W. Myers	2,380.00	-	2,380.00	1,190.00	400.00	790.00
12	Mitchell Green	2,380.00	-	2,380.00	1,190.00	400.00	790.00
13	Edward Smith	4,748.29	-	4,748.29	2,000.00	2,000.00	748.29
14	Archie Donmo	7,081.45	-	7,081.45	5,000.00	2,081.45	-
15	Jerror Tarwo	5,259.03	-	5,259.03	2,629.52	2,693.00	-
	Total	162,094.92	24,236.33	186,331.25	58,214.52	25,374.45	18,073.77