Examination of Periodic Financial Statements

Client: Brewarrina Business Cooperative Ltd

Sub. Nbr: 2020342

Activity: Weilmoringle Swimming Pool

Act. Nbr.: 59161

Funds Controller: None

PFS Frequency: Quarterly

Budget Guidelines: Activity by Block

Section 20 Notice: None

Risk Rating: Not Yet Assessed

Objectives: Outcomes:

Provision of a recreational/therapeutic facility for Indigenous Australians with access to appropriate support services which contributes to their safety, health and well being.

Strong Whole of Government partnership to establish strategic interventions to ensure coordinated investment and action. Focusing on inventions for families and children to ensure children have the best start in life.

Responding to intergenerational change for Indigenous Elders.

The overall improvement in the health of whole the community.

In their Community Action Plan the Aboriginal Community Working Party highlighted the need for a swimming pool. This was with a view to addressing issues experienced by families such as:

young children and the unacceptably high incidence of otitis media

" assist the elderly with exercise and the management of stage 2 diabetes.

" general well being of the community and assisting to decrease the prevalence of diabetes,

providing an area to utilise gentle exercise regimes for elders to reduce incidents of injury

" giving the general community a recreation facility in the heat of the summer, which consistently reaches 40-45 degrees.

Brewarrina Shire Council support the proposal and will fill the pool initially at no charge.

The title of the land where the pool is located is held by the Weilmoringle Local Aboriginal Lands Council. It has been agreed that the public liability is the responsibility of the NSW Aboriginal Lands Council.

Landscaping, including the provision of trees and fencing will be undertaken by the local CDEP (Murrawarri) as part of their mutual obligation activities. The local community have committed to the management and on-going maintenance of the pool and surrounds. This will be done by way of a newly registered Cooperative made up of community members which will be responsible for the employment of staff and the management of the facility. Families will pay for entry to the pool either by gold coin, seasonal or family ticket.

The project will be auspiced by the Barwon Darling Alliance which is based in Bourke.

It has been acknowledged Indigenous children are more likely to incur otitis media, and other skin irritations. Also, aged members of the Indigenous population are far

more likely to contract stage 2 diabetes due to poor diet and exercise. The pool provides an opportunity to address these issues while still providing a whole of community recreational outlet.

| Monitoring Note: | | | | | | | |
|---|------------------------|--------------------------|----------|----------|--------------|-----------|--------------|
| Released to Date - Capital: \$100,000.00 | | Operational: \$0.00 | | CDEP | CDEP: \$0.00 | | |
| Accounting method used by | grantee: CASH/A | ACCRUAL | | | | | |
| | | | YES | S NO N/A | A F | ile/Folio | |
| Certification as per T&C prov | vided | | V | | | 141 | |
| Financial Statement Document | ntation as per T& | ¢C | <u>/</u> | | | | _ |
| Correct Budgeting Requireme | ents as per T&C | | | | _ | | - |
| Grant releases recorded corre | ctly | | V | | | 140 | _ |
| Activity-generated income re- | corded | | | V | | | _ |
| All expenditure for approved | objectives | | V | | | | _ |
| Carry-overs from previous years addressed | | | V | | | | _ |
| Arithmetically accurate | | | | | | | - |
| 'ncome/Expenditure trend sat | | | | V | <u> </u> | | - |
| Reasonable amount of Debtor | rs and Creditors | | | ı | | | - |
| | For Per | riod Ending 31/0 | 3/2010 | | | | |
| Activity's Funds Position as a | t 31/03/2010 | (Attach all your working | papers) | | | | |
| Capital \$50,000. | Operational \$ | | | CDEP S | | | |
| Breaches entered in GMS: | General T&C | | YES | NO N/A | 4 | | |
| | Program-speci | ific T&C | YES | NO N/A | 4 | | |
| | Supplementar | y Condition T&C | YES | NO N/A | A | | |
| Follow-up required? YES | SNO | | | | | | |
| Comments: (Detail your observation | ons, findings and reco | mmendations.) | | | | . 1= | PATIMENST |
| \$1000 INTEREST RECLER | EU - ICC M | ANAGER WASGI | 1620 | 10 W | TENEST | - 773 | prince |
| O BBC FOR CONTRA | ICT MANASE | MENT. | | | | | |
| Recommended as Satisfactor | y) Unsatisfactory | YES/NO | | | | | |
| ROB WILCOX | | SNA ENSAGEM | LENT | TACER | | 10-6- | -/0 |
| Name | | Position | | | | Date | |

Supervisor's Instructions

| Financial Statement Accepted | as Satisfactory YES/NO | |
|---|------------------------|-------------------------|
| Follow-up action required Action Officer: | YES/NO | |
| Date to complete follow-up | | \/\ |
| Referral to manager required | YES/NO | |
| Name | Position | Date |
| Manager's Instructions No further action required Follow-up action required | YES/NO YES/NO | |
| Action Officer: Date to complete follow-up Name | Mo Ice MANGET Position | <u> 10/6/10</u> Date |



Certificate of Funds Usage

Certificate of compliance of this Periodic Financial Statement to the Terms & Conditions of the Program Funding Agreement 07/08

Provider: Family and Community Services and Indigenous Affairs

Reporting Period: 1/01/2010 - 31/03/2010

Funded Activity: Weilmoringle Swimming Pool

Please attach, where applicable:

- (a) Financial information (prepared by a Qualified Accountant, who must be a person acceptable to Us unless otherwise agreed by us) including:
 - (i) an income statement that identifies all line items of income and expenses provided in the financial year to date, including Project Income;
 - (ii) (ii) a schedule of the assets acquired during the Financial year compared with the budget;
 - (iii) a list of all your debtors, creditors and all accruals and pre-payments; and
 - (iv) any relevant supporting documentation.
- (b) a copy of the Bank Statement of your account referred to in paragraph 5.6(a) covering the date of the of the financial reporting period to which it relates.
- (c) a statement on how much you need to meet your current liabilities under legal commitments entered into by You under this Agreement.
- (d) copies of decisions and orders of any court or tribunal made against You or involving You if any.

Bookkeepers Certificate

I hereby certify that the attached financial statements are correct and identify all receipts, payments, debtors and creditors, accrued payables and receivables and provide an accurate record of utilisation of activity funds.

s 22 - irrelevant information

Ascountant/Bonkkeeper Oct Chairperson Certificate

I hereby certify, in accordance with condition 8.1 of the General Terms & Conditions <u>for Funding Agreements Relating to Indigenous Programs / Terms and Conditions for Funding Agreements with State/Territory/Local Government Agencies relating to Indigenous Programs that:</u>

- a) all Funding received was spent for the purpose of the Activity and in accordance with this Agreement and that You have complied with this Agreement;
- salaries and allowances paid to persons involved in the Activity are in accordance with any applicable award or agreement in force under any relevant law on industrial or workplace relations;
- c) unless the Project Period has expired or the Agreement has been terminated, the unspent portion of the Funds (if any) are available for use within the next Reporting period;
- d) the financial information is presented in accordance with <u>Our financial Reporting requirements</u>;
- e) where an Asset has been acquired with the Funds, that paragraphs 6.6 (d) and (g) have been complied with in respect to the Asset; and
- f) *we are able to pay all our debts as and when they fall due and have sufficient resources to discharge all our debts at the end of the current Financial Year.

| (State/Territory/Local Government Agencies should strike out paragraph (f) above) | |
|---|---------|
| | , |
| Chairperson/Chief Executive Officer | date:// |
| Chief Financial Officer/Authorised Person | |