

Dear Mr. Richards,

I, the undersigned Septimiu-Andrei Misaila, was elected and entrusted by the Staff Union with the task of auditing the Staff Coordinating Council and reporting on its findings.

I examined the Staff Coordinating Council financial records / associated documentation covering the mandated period as per the attached reference document.

Based on the documentation received/ access to the internal database, please find further a narrative report related to the current situation which I have examined in conjunction with your team.

## Contents

1. Audit Mandate and Authority .....	1
2. Scope and Objectives of the Audit .....	2
2.1 Scope .....	2
2.2 Objectives of the audit .....	2
3. Organizational Context and Governance .....	2
4. Audit Coordination and Key Roles .....	3
4.1 Coordination Framework .....	3
4.2 Key Contacts .....	3
5. Timeline and Progress Status .....	3
6. Current State Assessment .....	4
7. Conclusion/ Recommendations of the Auditor based on the noted Objectives .....	4

---

### 1. Audit Mandate and Authority

The audit was initiated following the election and formal entrustment of the auditor, myself, by the Staff Union, with a mandate to audit the Staff Coordinating Council and report findings. The audit covers the mandated financial period 2023–2024 and is conducted in coordination with internal Staff Union counterparts and a private audit firm providing back-up capacity as per the attached document.

---

## 2. Scope and Objectives of the Audit

### 2.1 Scope

The audit scope is a general audit of the UNOG Staff Union, including a review of:

- a. Financial records and associated documentation.
- b. Income sources and expenditure categories.
- c. Governance and approval.

The audit also considers activities funded or managed by the Staff Union, including travel support, meeting attendance, training, donations, long-service awards, and support to staff clubs.

### 2.2 Objectives of the audit

**The stated objectives of the audit include:**

- a. Evaluation of internal control systems and processes.
- b. Verification of compliance with internal policies, procedures, and applicable regulations.
- c. Identification of financial, operational, and strategic risks.
- d. Detection of irregularities and ethical concerns.
- e. Assessment of operational efficiency and opportunities for improvement.
- f. Review of corrective actions from prior audits, where applicable.
- g. Enhancement of governance, transparency, and accountability.
- h. CDP identifying areas for growth proposed HR/systems or software / procedures improvement.
- i. Provision of independent and objective assurance.

These objectives form the baseline against which audit work has been conducted.

---

## 3. Organizational Context and Governance

As per my comprehension, the UNOG Staff Union normally consists of 25 elected members, with one position currently vacant, and operates primarily in Geneva. An organigram was identified as to be confirmed if needed at the time of coordination last year.

**Key governance and operational features include:**

- a. Expenditure approval thresholds: amounts over CHF 500 require Council approval, while amounts under CHF 500 may be approved directly.
  - b. Funding sources: staff contributions and revenues generated through the Safi shop and UN Today magazine advertising.
-

## 4. Audit Coordination and Key Roles

### 4.1 Coordination Framework

The audit formally commenced with a coordination meeting on 09.10.2025, establishing scope, timelines, participants, and documentation requirements.

### 4.2 Key Contacts

#### Identified focal points include:

- a. **Auditor focal point:** Septimiu Andrei Misaila.
- b. **Coordination and finance liaison:** Laura Johnson (in light of an administrative assistant vacancy) later on Dominique Chantrel was designed as the point of contact for coordination and the like.
- c. **Back-up focal point:** Deputy Finance, Mohamed Bali.

A private audit firm provided back-up audit capacity and previously conducted the audit covering the period as per the attached documentation.

---

## 5. Timeline and Progress Status

Based on the documented history, **the audit has progressed through the following phases:**

- a. Initial role clarification meeting, Auditor / Staff Coordinating Council: **10.09.2025.**
- b. Audit coordination meeting, Auditor / Staff Coordinating Council: **09.10.2025.**
- c. Documentation requests and exchanges between the related parties: **October–December 2025**, with follow-up requests extending into **January 2026.**
- d. Further coordination and documentation exchanges between the related parties: **February 2026.**
- e. Access to the audited documentation database granted to Auditor: **19.03.2026.**
- f. Internal audit coordination meeting Auditor / Staff Coordinating Council: **24.03.2026.**
- g. Preparation of draft audit report: **Mars – April 2026.**
- h. Draft audit report sent for discussion: **01.05.2026.**
- i. **Final Audit** report sent to the related parties: **08.05.2026**

The original deadline for completion was defined as **prior to the next General Meeting (mid-January 2026)**; however, as depicted above, documentation access and coordination activities extended beyond this date.

---

## 6. Current State Assessment

- a. The audit has moved from planning and coordination into the reporting phase.
- b. Relevant financial documentation has been made available and reviewed following database access.
- c. This audit report has been prepared, indicating that substantive audit work has been completed.

This represents a transition from gathering and review of various documents to consolidation of findings and formulation of conclusions and recommendations as discussed in the last coordination meeting.

## 7. Conclusion/ Recommendations of the Auditor based on the noted Objectives.

no.	Objective	Assessment Summary	Recommendations
1	Evaluation of internal control systems and processes.	Records are available; however, traceability sometimes is impaired due to in some cases weaknesses in folder structures, inconsistent file naming, and limited accessibility to certain documents. In addition, the IT department performs system backups that result in duplicate folders. Therefore, information is dispersed across multiple locations and, in some cases, not consolidated in the most up-to-date directories. Examples were given related to invoices, payments, supporting documents, and/ or schedules, naming of schedules.	It is recommended to re-define the database, recreate the structure, and proceed with a cleanup. Enforce a standardized digital filing system; mandate a "minimum documentation pack" (Financial family/ Subject/ invoice, approval, payment, supporting documentation) per transaction. Maintain complete transaction records and supporting schedules, consolidated of each family/ subject on an annual basis, updated as required. Financial family naming conventions should align with those used in the financial audit to guarantee traceability.
2	Verification of compliance with internal policies, procedures, and applicable regulations	The documents shared did not include any written internal policies, procedures, or documented practices. However, during coordination meetings and related discussions, the folder structure and the invoice approval workflow were explained verbally.	It is recommended to issue formal financial approval procedures for tracking purposes, as well as facilitating the workload in the event of staff turnover, include (Financial family/ Subject/ invoice, approval, payment, supporting documentation) per transaction.
3	Identification of financial, operational, and strategic risks	In some cases, incomplete documentation and unclear tracking practices can increase the risk of errors.	It is recommended to develop a Staff Union risk register; assign clear ownership for actions to the finance focal point. It is recommended to designate a document controller and a financial controller, or to formally consolidate these tasks under one clearly defined function. Proceed with a cleanup and consolidation of the database.

4	Detection of irregularities and ethical concerns	Missing sometimes supporting documentation payments, supporting documents, and/ or schedules updates can create vulnerabilities/errors.	It is recommended to implement a checklist template. This checklist should be used internally by both the document controller responsible for the database and the financial controller. The checklist should be aligned by subject matter and require related parties to submit a standardized set of supporting documents, which are to be filed consistently in the corresponding folders.
5	Assessment of operational efficiency and opportunities for improvement	Fragmented storage and the presence of duplicate folder structures increase both workload and the risk of errors. Expense tracking should therefore be consistent and standardized at the subject level to ensure clarity and efficiency.	It is recommended to rationalize folder structures; introduce a single consolidated expense tracking system for all transaction types.
6	Review of corrective actions from prior audits, where applicable	Previous audits and related recommendations were not reviewed or analyzed.	It is recommended to create a recommendation follow-up log with assigned responsibilities and target closure dates, as/if applicable.
7	Enhancement of governance, transparency, and accountability	Accountability is overly dependent on individuals rather than structured, transparent processes and systems.	It is recommended to formalize reporting templates for readiness review. Create templates for approval workflow, or information sharing to be available at any given moment for a better understanding of the structure and internal tasks required
8	CDP identifying areas for growth proposed HR/systems or software / procedures improvement	High reliance on manual processes and informal knowledge.	It is recommended to implement an audit-readiness checklist and provide targeted training to relevant staff to support future audit discussions. Consideration should also be given to strengthening controls within a financial system software and/or other controls.
9	Provision of independent and objective assurance	Independence is maintained through external audit.	It is recommended to formalize audit access protocols to ensure records are available according to fixed milestones.

Given the scope limitations encountered, I was unable to fully confirm the attached balances and transactions. Additional clarification or supporting information may help complete this step; however, as the financial balances were prepared by an independent accredited company, I would respectfully defer to the Staff Coordinating Council / Staff Union regarding the closure of these balances.

Thank you for your time and consideration,

Auditor: MISAILA Septimiu Andrei

Signature: