

**Our Ref.** Six Month Financial Audit Reminder  
**Your Ref.** CF number  
**Contact** Your name  
**Email** directpayments@aberdeencity.gov.uk  
**Direct Dial** your direct dial



**ABERDEEN**  
**CITY COUNCIL**

03 May 2017

Name  
or  
Legal Representative name and  
address

**Services Accounting**  
Corporate Governance  
Aberdeen City Council  
1st Floor West  
Business Hub 7  
Marischal College  
Broad Street  
Aberdeen  
AB10 1AB

Dear Name or legal representative

### Six Month Financial Audit Reminder letter

I am writing to remind you that the audit relating to Supported Person's name is due for submission to this office by the date. This audit will cover the following period;

- From – to

**Please ignore this letter if you have already provided the monitoring statements for the period mentioned above.**

The following paperwork, where applicable, relating to this period is required to complete the audit:

- A completed monitoring statement
- All bank statements
- All invoices
- All receipts

Where a personal assistant is employed directly by you:

- All payslips
- All HMRC documentation
- All time sheets
- All receipts
- All employers insurance documents

Please send this paperwork by insert date.



Aberdeen City Health & Social Care Partnership  
*A caring partnership*

If you have any difficulty with the monitoring statement or accompanying paperwork please contact your practitioner as a matter of urgency so we can provide assistance. If you do not have an allocated worker, please contact the team you are allocated to.

**Yours Sincerely,**

**Your name**  
**Finance Support Assistant**