

State of Vermont SOC Reporting

Department SOC Check-off List

[\(BP #12 SOC Check-off List\)](#)

Vendor and Service:

Does the report cover the services contracted to our institution?

- The report covers the services contracted to our institution. See the services in the comments below.
- The report does not cover the services contracted to our institution.

Comments:

Report Type:

- SOC 1 Type 1 SOC 2 Type 1 SOC 3
- SOC 1 Type 2 SOC 2 Type 2

Auditing Company:

Testing Period:

Date of Report:

Report Results:

Does the report identify any current or subsequent significant events?

- The report does not identify current/subsequent significant events.
- The report identifies current/subsequent significant events. See the events in the comments below.

Comments:

Are complementary user entity controls necessary to achieve the control objective?

- The report does not identify any necessary complementary user entity controls.
- The report identifies necessary complementary user entity controls. See the controls in the comments below.

Comments:

Does the report identify any subservice organizations?

- The report does not identify any subservice organizations.
- The report identifies subservice organization. See the organization in the comments below.

Comments:

Does the report contain any limitations with regard to documentation or testing of controls?

- The report does not identify any limitations.
- The report identifies limitations. See the limitations and related controls in the comments below.

Comments:

What was the auditor’s opinion of the organization’s assertion?

- The auditor’s opinion does not identify any exceptions of concern. Also known as “unqualified.”
- The auditor’s opinion identifies significant exceptions of concern. Also known as “qualified.” See the significant exceptions in the comments below.
- The auditor could not express an opinion due to scope limitations.

Comments:

Did the auditor identify weaknesses in the controls?

- This report type does not test controls.
- The report does not identify any weaknesses.
- The report identifies weaknesses. See weaknesses and management’s response in the comments below.

Comments:

Review Summary (Additional comments, if needed)

Must be Approved

Reviewed Date: _____ **Approved By:** _____ **BU#** _____

SWR - Internal Control 02.13.19