Crystal Hunter Accounts Examiner Office of Policy and Management 450 Capitol Avenue MS #52 ADM Hartford, CT 06106-1379			
RE: Federal Single Audit Exemption/Gra	unt Expenditure Notification		
Dear Ms. Hunter;			
This is in response to MaryAnn Palmard Single Audit Act filing requirements. Do of Federal Financial Assistance was exall programs was \$(Federal Single Audit Act, we are exempt	uring our fiscal year, which ender pended. Total expenditures see below for OPM related expenditures.	of Federal Finditures). Based	, less than \$750,000 nancial Assistance for d on the guidelines of the
Regarding the completion of a financial a	audit, please be advised of the fol	llowing:	
A financial audit was not perf A financial audit was perform	Formed for this period. ned for this period and is enclosed	d.	
Please contact	by phone at ()	_ or by e-mail at
if you	ı have any questions.		
	Sincerely,		
	Name of Signato	ory	
	Name of Organia	zation	
	Federal Employe	er ID # (FEIN)	
Schedule of Office of Police	cy and Management Federal Fina	nncial Assistanc	e Expenditures
From/ to/	_/		
Project Title	Grant Award Number	SID#	Total Expenditures

Date: ____/ ____/

This form and the financial audit report (if applicable) can be submitted in hardcopy *or* by e-mail.

Crystal Hunter
Accounts Examiner
Office of Policy and Management
450 Capitol Avenue
MS #52 ADM
Hartford, CT 06106-1379
Crystal.Hunter@ct.gov