

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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

RE: State Single Audit Exemption/Grant Expenditure Notification

Dear Ms. Hunter:

This is in response to the letter dated \_\_\_\_ / \_\_\_\_ / \_\_\_\_ which pertains to the State Single Audit Act filing requirements. During our fiscal year, which ended \_\_\_\_\_, less than \$300,000 of State Financial Assistance was expended. Total expenditures of State Financial Assistance for all programs was \$\_\_\_\_\_ (see below for OPM related expenditures). Based on the guidelines of the State Single Audit Act, we are exempt from filing a State Single Audit for this period.

Regarding the completion of a financial audit, please be advised of the following:

A financial audit was not performed for this period.

A financial audit was performed for this period and has been uploaded to EARS.

Please contact \_\_\_\_\_ by phone at ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_ or by e-mail at \_\_\_\_\_ if you have any questions.

Sincerely,

\_\_\_\_\_  
Name of Signatory

\_\_\_\_\_  
Name of Organization

\_\_\_\_\_  
Federal Employer ID # (FEIN)

Schedule of Office of Policy and Management State Financial Assistance Expenditures

From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Project Title	Grant Award Number	SID #	Total Expenditures


This form can be submitted in hardcopy *or* by e-mail.

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