

**FEDERAL SINGLE AUDIT
FILING EXEMPTION NOTIFICATION**

Date _____

Office of Internal Audit
Connecticut State Department of Education
P.O. Box 2219
Hartford, CT 06145

This letter is to inform the Office of Internal Audit that for our fiscal year ended _____, the total expenditures of Federal financial assistance was less than \$1,000,000.

Total expenditures of Federal financial assistance awards for all programs was \$ _____.
Therefore, we are exempt from filing a Federal Single Audit for this fiscal period.

If you have any questions, please contact:

Contact Person: _____

Name of Organization: _____

*Federal Employer Identification Number (FEIN): _____

Address: _____

_____ Zip _____

Telephone (____) _____ Email _____

Very truly yours,

Chief Executive Officer

Chief Financial Officer

Please return the completed form to sde.audit@ct.gov.

*This form will not be accepted without a complete and accurate federal employer identification number.