

FINANCIAL AUDIT INFORMATION

All applicants, except ODNR applicants, must complete this supplemental form and return it with the application.

Which category best describes your entity?

- State agency or subdivision of the state
- Area-wide or Planning Agency
- Local government
- Institution of higher learning
- School District
- Nonprofit organization
- Park District, Conservancy District, Port Authority

For Fiscal Year 2020, what was the total amount of federal awards received?

- Less than \$25,000
- \$25,000 - \$100,000
- More than \$100,000

Date of your organization's last financial audit: _____
(Month and Year)

Period covered by audit:

FINDINGS

No negative findings: Negative findings:

If there were negative findings, please attach an explanation describing how they have been resolved.

Next audit scheduled: _____

Period to be covered by next scheduled audit: _____

Name (Printed): _____

Title: _____

Date: _____