ACCEPTANCE OF AUDIT REQUIREMENTS

FFY 2017 Homeland Security Grant Program

We agree to have an audit conducted in compliance with OMB Uniform Guidance 2 CFR 200, if applicable. If a compliance audit is not required, at the end of each audit period we will certify in writing that we have not expended the amount of federal funds that would require a compliance audit ($750,000). If a State Agency: Non-Federal entities that expend $750,000 or more in federal funds (from all sources including pass-through sub awards) in the organizational fiscal year shall have a single organization-wide audit conducted in accordance with the provisions of if applicable to your State Agency in accordance with 2 CFR 200 F and the State CAFR. If required, we will forward for review and clearance a copy of the completed audit(s) to the following:

NH Department of Safety

Office of the Commissioner

Grants Management Unit

33 Hazen Drive

Concord, NH 03305

The following is information on the next organization-wide audit that will include this agency:

1. \*Audit Period

(Organization’s fiscal or calendar year to be audited)

Beginning: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ending: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

date date

1. Audit will be submitted to NH DOS Grants Management Unit by:

(Date must be no later than the ninth month after the end of the audit period)

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

Additionally, we have or will notify our auditor of the above audit requirements prior to performance of the audit for the period listed above. We will also ensure that, if required, the entire grant period will be covered by a compliance audit which in some cases will mean more than one audit must be submitted. We will advise the auditor to cite specifically that the audit was done in accordance with OMB Uniform Guidance 2 CFR 200.

NH DOS Grants Management Unit will furnish any information regarding the OMB Uniform Guidance 2 CFR 200 audit requirements, upon request.

FAILURE TO COMPLETE THIS FORM WILL RESULT IN YOUR GRANT AWARD BEING DELAYED AND/OR CANCELLED.

Signatures: Dated\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Program Director Financial Officer Authorized Official

(per RSA 31:95b or RSA 37:6)

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