

STATE OF NEVADA
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF COMMUNITY PARTNERSHIPS AND GRANTS

NOTICE OF SUBAWARD

ATTACHMENT E

Audit Information Request

1. Non-Federal entities that **expend** \$750,000.00 or more in total federal awards are required to have a single or program-specific audit conducted for that year, in accordance with 2 CFR § 200.501(a). Within nine (9) months of the close of your organization's fiscal year, you **must** submit a copy of the final audit report to the Office of Community Partnerships and Grants. Electronic copies are preferred and can be sent to GMU@dhhs.nv.gov. Mail hard copies to the following address:

***State of Nevada Office of Community Partnerships and Grants
4126 Technology Way
Carson City, NV 89706***

2. Did your organization expend \$750,000 or more in all federal awards during your organization's most recent fiscal year? YES NO
3. When does your organization's fiscal year end? _____
4. What is the official name of your organization? _____
5. How often is your organization audited? _____
6. When was your last audit performed? _____
7. What time period did your last audit cover? _____
8. Which accounting firm conducted your last audit? _____

Signature

Date

Title