

	<p><b>Child &amp; Adult Care Food Program</b></p> <p><b>Audit Requirements</b></p>	<p><b>Teaching and Learning Support</b> <b>Child Nutrition Services</b> 801 West 10<sup>th</sup> Street, Suite 200 P.O. Box 110500 Juneau, Alaska 99811-0500 (907) 465-8711 annmarie.martin@alaska.gov</p>
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February 13, 2008

Federal regulations require that all agencies expending more than \$500,000 in total federal funds (federal funds from all sources-not just the CACFP) per agency fiscal year complete an organization-wide audit within nine months of the end of the agency's fiscal year. In the State of Alaska, these audits are submitted to the Alaska Department of Administration, Division of Finance, State Single Audit <http://fin.admin.state.ak.us/dof/ssa/index.jsp>.

USDA requires our office to maintain verification that all agencies participating in the Child and Adult Care Food Program (CACFP) are in compliance with the audit requirement. It is not necessary to submit a copy of the actual audit to this office. Failure to submit the required information to the Alaska Department of Administration, by September 30, 2008, will result in being found seriously deficient and may lead to the termination and disqualification of your program from the Child and Adult Care Food Program.

You may also receive reimbursement of audit costs for the CACFP portion of the federal funds expended by your agency. If you would like to request a reimbursement, please complete the Audit Reimbursement Request and return it to Child Nutrition Services.

If you have any questions, please feel free to contact Child Nutrition Services.

Ann-Marie Martin  
Program Specialist

	<p>Child &amp; Adult Care Food Program</p> <p><b>Audit Reimbursement Request</b></p>	<p><b>Teaching and Learning Support Child Nutrition Services</b>        801 West 10<sup>th</sup> Street, Suite 200        P.O. Box 110500        Juneau, Alaska 99811-0500        (907) 465-8711        annmarie.martin@alaska.gov</p>
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\_\_\_\_\_  
Name of Agency

\_\_\_\_\_  
Date

We would like to request reimbursement for the cost of our FY\_\_\_\_\_ audit. We understand that we can be reimbursed only the portion of the audit's cost equal to the CACFP's portion of the total federal grant.

\$ \_\_\_\_\_ Total federal funds received in FY\_\_\_\_

\$ \_\_\_\_\_ Total CACFP funds received in FY\_\_\_\_

\$ \_\_\_\_\_ % of federal funds represented by CACFP

\$ \_\_\_\_\_ Total cost of audit

\$ \_\_\_\_\_ Amount of reimbursement requested

The above agency also assures the Alaska Department of Education & Early Development that:

The FY\_\_\_\_\_ audit has been submitted to Alaska Department of Administration, Department of Administration, Division of Finance Single Audit Coordinator.

Name of auditing firm: \_\_\_\_\_

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

\_\_\_\_\_  
Signature of Agency Representative

\_\_\_\_\_  
Title

**The Copy of audit billing must be attached**

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**FOR DOE USE ONLY:**

Amount approved for payment \_\_\_\_\_

Financial Coding \_\_\_\_\_

Program Approval /Date \_\_\_\_\_

Approval for payment/Date \_\_\_\_\_