



Florida Department of
Law Enforcement

Guy Tunnell
Commissioner

Office of Criminal Justice Grants

Mailing Address:
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Tallahassee, Florida
32399-0001

Certification of Audit Exemption

Complete the following information for each audit period for which your agency wishes to declare exemption from the Annual Audit Report Requirement. This form must be signed by either the Subgrantee's Authorizing Official or the Chief Financial Officer as specified by the grant agreement and submitted to the Florida Department of Law Enforcement.

Subgrant Recipient: _____

County: _____

Grant Numbers: _____

I, the undersigned official, hereby declare that the above listed unit of local government has expended less than \$500,000 in Federal funds during the below specified fiscal year:

Subgrantee's Fiscal Year (Enter dates, typically 10/01/xxxx to 09/30/xxxx.)

From: _____ **To:** _____

From: _____ **To:** _____

Signature

Date

Typed name

Typed title