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| *Note: Rule Chapter 69I-5, Florida Administrative Code (F.A.C.), State Financial Assistance, incorporates the State Projects Compliance Supplement and this form by reference in Rule 69I-5.007, F.A.C. The State Projects Compliance Supplement and this form can be accessed via the Department of Financial Services’ website at https://apps.fldfs.com/fsaa/.* |

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| *Fillable form. Click in the Word table cells (shaded areas) to enter the requested information.* |

1. **General Information**

|  |  |  |
| --- | --- | --- |
| **State Agency** | … | |
| **Catalog of State Financial Assistance (CSFA) Number** | … | |
| **Project Title** | … | |
| **Completed By/Title** | … | … |
| **Telephone/Email** | … | … |
| **Inspector General/   Program Office Review** | … | |

Note: For each state project included in the State Projects Compliance Supplement (see https://apps.fldfs.com/fsaa.), project objectives and procedures will be included in Part Four: State Project Compliance Requirements. The auditor will look to Part Four for compliance requirements pertaining specifically to each individual project, including information for any special tests and provisions. For a general description of the compliance requirements, audit objectives, and suggested audit procedures, the auditor will look to Part Three: Compliance Requirements.

1. **Program Information**

Program Objectives:

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| --- |
| … |

Program Procedures:

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| --- |
| … |

1. **Compliance Requirements**

For each type of compliance requirement below, include any specific requirements pertinent to this state project, including authoritative references (e.g., law, rule, contract provision). If the state project has no requirements applicable to a compliance type, indicate “Not Applicable.” If the state project compliance requirements are the same as included in Part Three: Compliance Requirements, indicate “See Part Three.” For compliance requirements that differ from any previously submitted requirements or the requirements included in Part Two: Matrix of Compliance Requirements, provide written explanations below.

A. Activities Allowed or Unallowed:

|  |
| --- |
| … |

B. Allowable Costs:

|  |
| --- |
| … |

C. Cash Management:

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| --- |
| … |

D. Eligibility:

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| --- |
| … |

E. Equipment and Real Property Management:

|  |
| --- |
| … |

F. Matching:

|  |
| --- |
| … |

G. Period of Availability of State Funds:

|  |
| --- |
| … |

H. Reporting:

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| --- |
| … |

I. Subrecipient Monitoring:

|  |
| --- |
| … |

J. Special Tests and Provisions:

Note: For each required special test and provision, provide the compliance requirement, the audit objective, and suggested audit procedures. Include any authoritative references (e.g., law, rule, contract provision).

Special Tests and Provisions (1)

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| --- |
| … |

Special Tests and Provisions (2)

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| --- |
| … |

Email completed forms to the FSAA Coordinator at the Department of Financial Services, Bureau of Auditing (FSAA@MyFloridaCFO.com). Contact the Bureau of Auditing at (850) 413-3060.