**Municipal School Audit Exception Request**

**Municipality:**

 **Municipality fiscal year end date:**

**Fiscal year school audit exception is requested for:**

**In order to receive the exception, the following conditions must be met:**

* The requesting municipality does not operate its own school
* The annual municipal audit will be provided to Maine DOE

**By signing below, I certify that the above conditions are true, and I assure the annual municipal audit will be forwarded to the Department in a timely manner.**

Signature/Title – Superintendent or Municipal Treasurer Date

Print Name and Title – Superintendent or Municipal Treasurer

[**Audit exception statute requirements**](http://legislature.maine.gov/statutes/20-A/title20-Asec6051.html)

**email to: Postal mail:**DOE.Audit@maine.govStephanie Clark

 School Finance & Operations

 Department of Education

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