

A. PENDER MAKIN COMMISSIONER

## Audit Extension Request

**Extension requests will not be considered after June 30** (6 months after audit due date)

## Name of School Administrative Unit:

Please indicate the late document below: (check one box) Financial Statement Audit	Please indicated the entity or entities t (may check more than one box if applicable) School Department	he request(s) is intended
Single Audit (A-133)	Municipal	
Corrective Action Plan	Combined	
Request for opportunity for a hearing OR to submit	t written testimony in lieu of a hearing (	choose one):
In lieu of a hearing pursuant to <u>20-A MRSA §6801-A(1)</u> , I have answered the questions below*.		
I request a hearing pursuant to 20-A MRSA §680	<u>01-A(1)</u> .	
*The following questions must be answered in lieu of a hearing (please attach additional pages if needed)		
<b>1.</b> Please Explain the reason why the required document(s) are late?		
2. Please indicate audit firm preforming the audit		
<i>3.</i> What actions will be taken to ensure reporting deadlines will be met in the future?		
<b>4.</b> When will the Department receive the requ	uired document(s)? Date	
Signature – Superintendent of Schools	Date	
Print Name – Superintendent of Schools	email to: — <u>DOE.Audit@maine.gov</u>	<b>Postal mail:</b> Stephanie Clark School Finance & Operations Department of Education 23 State House Station Augusta ME 04333-0023