Virginia Department of Transportation

Federal Pass through Payments and Single Audit – **Response Form**

Fiscal Year 2015

*Please complete the following questions and email your response to* [*CAFR@VDOT.Virginia.Gov*](mailto:CAFRs@Virginia.VDOT.Gov)

*by November 30, 2015.*

Name of Subrecipient:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. The spreadsheet provided by VDOT of federal pass through payments for FY 2015 (place check where applicable):

\_\_\_\_\_ Agrees with my organization’s records (SEFA) for FY 2015

\_\_\_\_\_ Does not agree with my organization records (SEFA) for FY 2015

Please use the original VDOT spreadsheet of pass-through amounts to identify your discrepancies and/or reconciliation. *(questions about the spreadsheet may be addressed to Terelle Walker at (804)786-4115 or Terelle.Walker@vdot.virginia.gov)*

1. The amount of total federal pass-through federal funds expended by my organization from all sources (including other state agencies and other entities) for FY 2015:

$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. FY 2015 Single Audit for my organization:

\_\_\_\_\_\_\_ FY 2015 Single Audit not required (federal expenditures < $500,000)

\_\_\_\_\_\_\_ FY 2015 Single Audit required (federal expenditures>/= $500,000)\*\*

\*\**Note – Per OMB requirements, a data collection form and reporting package are to be submitted to the federal clearinghouse within the earlier of 30 days after the receipt of the auditor’s report or nine months after the end of the audit period. Please notify VDOT at the following email address when the submission has been made to the federal clearinghouse:* [*CAFR@VDOT.Virginia..Gov*](mailto:CAFRs@Virginia.VDOT.Gov) *Please ensure that you include your entity name in the subject line of your email to ensure proper distribution. For example, “FY2015 CAFR City of Suffolk”*

Submitted by:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_