

Those contracting entities that do not use TX-UNPS must, if applicable, complete and submit this paper form as part of the application process.

SECTION I – CONTRACTING ENTITY (CE) INFORMATION

1. Name of Contracting Entity (CE):	2. CE ID:

NAME AND TITLE OF CONTRACTING ENTITY FINANCIAL AUDIT CONTACT

1. Name of Financial Audit Contact			
Salutation	First Name	Last Name	2. Email Address
3. Phone (include area code)	Extension	Fax (include area code)	
4. Title			

ORGANIZATION TYPE

5. Type of Agency

CONTRACTING ENTITY'S 12-MONTH FISCAL YEAR

6. Fiscal Year:

FEDERAL FUNDS

7. Does the organization expend federal funds from a program other than those administered by TDA? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. Identify the federal funds source and the total amount for each source that your organization projects to expend for the fiscal year.

Federal Fund Source	Amount
	\$
	\$
	\$
	\$
	\$

SECTION II – CERTIFICATION

I understand that if I meet the requirements of the Single Audit Act, now or in the future, I must submit an audit as a condition of eligibility to participate in the Programs administered by the Texas Department of Agriculture Food and Nutrition Division, and that failure to do so as required could result in adverse action, including the withholding of my claim for reimbursement payments and termination of my contract. I also understand that if I am a private non-profit organization subject to the requirements of the Single Audit Act and have a financial audit performed annually, I must also obtain a single audit on an annual basis.

Signature - Authorized Representative Date _____
Title - Authorized Representative

Printed Name - Authorized Representative