



## AUDIT REPORT EXTENSION REQUEST FORM FOR A-133 AUDIT REPORTS

This form **does not** constitute an approval for an extension to submit the A-133 audit report. Written approval **must** be obtained from the cognizant or oversight federal agency within 9 months of the fiscal year-end. Otherwise, the auditee may be subject to withholding of funding for federal programs.

**AUDITEE**

|              |       |                |  |
|--------------|-------|----------------|--|
| Agency Name  |       | Agency FEIN(s) |  |
| Address      |       | SED #          |  |
| Contact Name | Title |                |  |
| Signature    |       | Date           |  |
| Telephone    | Fax   | Email          |  |

**AUDITOR**

|                    |           |                         |                  |                |
|--------------------|-----------|-------------------------|------------------|----------------|
| Firm Name          |           | Partner Name            |                  |                |
| CPA Signature      |           |                         |                  |                |
| NYS License Number | Telephone | Engagement Letter Date* | Total Audit Fees | Non Audit Fees |

\*Attach a copy of the engagement letter; must reference type and scope of audit, intended completion date, and fees.

**REPORT**

|                      |   |                    |
|----------------------|---|--------------------|
| Fiscal Year End Date | Original Due Date<br>(No later than FYE + 9 months) | Requested Due Date |
| Reason for Request:  |   |                    |

**SUBMIT TO THE APPROPRIATE ADDRESS:****USDA**

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**Federal Agency:** Please fax copy of approval letter to NYSED at (518) 473-0259 or email to [fsanda133@mail.nysed.gov](mailto:fsanda133@mail.nysed.gov).