

CERTIFICATION OF AUDITED COST DATA

A non-profit corporation that operates a Group Home, Foster Family Agency, and/or a Residentially Based Services (RBS) program should have their Certified Public Accountant (CPA) complete and submit this form as part of the required financial audit if the CPA has not otherwise provided written documentation which clearly shows that the required cost data reports were audited and that the information was fairly stated in all material respects in relation to the basic financial statement taken as a whole.

Please have the completed and signed form sent to:
California Department of Social Services
Program and Financial Audits Bureau
ATTENTION: Financial Audits Unit Manager
744 P Street, MS 8-13-23
Sacramento, California 95814

NON-PROFIT CORPORATION NAME	PROGRAM NUMBER(S)
STREET ADDRESS	PROGRAM FISCAL YEAR (MO/YR-MO/YR)
CITY, STATE AND ZIP CODE	PROVIDER PHONE NUMBER

The attached supplementary cost data reports are presented for the purpose of additional analysis and are not a required part of the basic financial statements but are required as supplementary information by the California Department of Social Services in accordance with Manual of Policies and Procedures Section 11-405.214. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements, and in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Check only the forms which apply: SR3 _____ SR4 _____ FCR12FFA _____
 THP+FC _____ SR3 (RBS) _____ SR 4R (RBS) _____ SR 4C (RBS) _____

In compliance with the False Claims Act (31 U.S.C. §3729-3733), I certify that the information on this form is true and correct.

PRINTED NAME OF CPA	SIGNATURE OF CPA	DATE
ADDRESS		
CITY, STATE AND ZIP CODE		