ATTACHMENT C

Office of Accounts and Control
From:
(Department)
Subject: Certification of data submitted for fiscal year end closing
I hereby certify that the data listed below which is being submitted the Office of Accounts and Control in the (select one)
attached document(s) e-mail (check one)
dated is complete and accurate to the best of knowledge.
I further certify that my agency will conduct a complete review of payments that meet or exceed the \$350,000.00 threshold that are p from July 1 st thru August 9 th . If these goods or services are for 2022 expenses, I will report this no later than August 12 th as a mate accounts payable for FY 2022.
Included below is a brief description of the data/other information t is the subject of this certification:
I understand that this data/information has been requested by State Controller to assist in preparing the State's Ann Comprehensive Financial Report.
I have reviewed the data/information and, where applicable, comparit to the previous year's information. I have identified any signific differences, researched the reasons for such differences, and I satisfied with the result of this research.
Signature Date
Title