

Independent Auditor Selection Form Fiscal Year 2025/26

Oakland Unified School District _____ School District CDS Code #: 01-61259-0129932
East Bay Innovation Academy _____ Charter School

Each year the State Controller's Office confirms that the county offices of education, school districts, charter schools and certain joint powers entities have arranged for their annual audits.

Please complete the following for the above charter school:

Audit Firm: Christy White, Inc. _____
Address: 348 Olive St. San Diego, CA 92103 _____
Telephone: 619-270-8222 _____ 2025/26 Fiscal Year Audit Fee \$ 20,565 _____

If a multiple year contract, please state the fiscal years covered and fee for each year:

Fiscal Year 2026-27 _____ Fee \$ _____
Fiscal Year _____ Fee \$ _____
Fiscal Year _____ Fee \$ _____

Date of Charter School Governing Board Approval: _____

The District has verified that this firm is authorized to conduct school audits by confirming this firm's name appears on the Certified Public Accountants Directory Service (i.e. CPADS) for Local Education Audits list. <http://cpads.sco.ca.gov/>

Miranda Thorman _____
Authorized Charter Representative (Print Name)

Miranda Thorman _____
Charter Representative's Signature

3/14/2026 _____
Date

Sponsoring District Representative's Signature

Date

Charter Schools: Please complete and return to your sponsoring district representative listed below. After reviewing and signing, return to ACOE.

Please return to: Timothy Ryan-Conner _____

By (date): 3/14/2026 _____

PLEASE RETURN BY MARCH 31, 2026 TO LILY ROCHA GARCIA, DISTRICT BUSINESS & ADVISORY SERVICES, ROOM 348.






2025-26 Charter Independent Auditor Selection Form

Final Audit Report

2026-03-31

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