Grant Payment
ARPA Part C, Early Education Programs
Fiscal Year 2022–23

<table>
<thead>
<tr>
<th>County Code</th>
<th>County Treasurer</th>
<th>PCA</th>
<th>Service Location Field</th>
<th>Suffix</th>
<th>Grantee</th>
<th>SELPA(^1) Code</th>
<th>Payment Amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>56</td>
<td>Ventura</td>
<td>25657</td>
<td>10561</td>
<td>01</td>
<td>Ventura County Office of Education</td>
<td>5600</td>
<td>$28,105.00</td>
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</tbody>
</table>

California Department of Education
Special Education Division
Index 0663, Program Cost Account 25657
Standardized Account Code Structure (SACS) / Revenue Object Code: 8182
SACS / Resource Code: 3385
\(^1\)Special Education Local Plan Area

VCOE
Deposit Date 10/23/23
CR213439
010-8182-3385
Request for Payment of a Non-Formula Grant

Date: July 20, 2023

1. SEND AN ORIGINAL AND TWO COPIES OF THIS COMPLETED REQUEST TO:
   Accounting Office
   1430 N Street  Suite 2213

   (Check unit below according to source of funds.)
   ☑ State Funds  445-5787
   ☐ Federal Funds-USDOE  323-2246
   ☐ State Operations  323-4798
   ☐ Federal Funds-USDA & USDHHS  322-3020

2. Program Title:
   ARPA Part C, Early Education Programs

3. Fiscal Year: 2022–23
4. Index Code: 0663
5. PCA Code: 25657

6. School (SACS) Accounting Codes:
   Resource Code: 3385
   Revenue Object Code: 8182

7. Total of This Request:
   $1,223,655.50

8. Program Contact For Questions Regarding This Request:
   Name: Liem Vo, SEDGrants@cde.ca.gov
   Title: Associate Govrenmental Program Analyst
   Unit: Fiscal Payments 1 Unit
   Phone: (916) 319-0282

9. CERTIFICATION OF AUTHORIZING AGENT: I hereby certify that to the best of my knowledge and belief: (a) the information entered on this request and the attached payment schedule is accurate and I hereby authorize payment of funds, and (b) the program unit responsible for this request has received appropriate assurances indicating that each grantee will abide by the terms of the grant.

   Name: (Print or Type)
   Shiyloh Duncan-Becerril
   Title: Associate Director, Special Education Division
   Signature:
   Date:

10. Attach a schedule of payments with sub-totals by county and district.

11. Send an electronic file of this request to the "payments" mailbox.

12. COE’S and program contacts will be notified by e-mail once claim schedules are sent to SCO.