VCOE Deposit Date 10-28-22 CR188308 130-8520-5380-0

## 2022 Breakfast Grant Fiscal Year 2022–23

| County<br>Treasurer | County<br>Code | PCA   | Service<br>Location<br>Field | Grantee                           | Total Grant | Payment<br>Amount<br>(90%) |
|---------------------|----------------|-------|------------------------------|-----------------------------------|-------------|----------------------------|
| Ventura             | 56             | 23668 | 72546                        | Oxnard Union High School District | \$14,245.00 | \$12,820.50                |
| Statewide Total     |                |       |                              |                                   |             | \$12,820.50                |

## **Request for Payment of a Non-Formula Grant**

|  |  |                     |                             | Date:<br>Septer    | mber 30, 2022       |  |  |  |  |
|--|--|---------------------|-----------------------------|--------------------|---------------------|--|--|--|--|
| 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- ☐ State Operations 323-4798 ☐ Federal Funds-USDA & USD |                     |                             |                    |                     |  |  |  |  |
| Program Title:     School Breakfast Program and Summer Food Service Program Startup and Expansion Grant  |  |                     |                             |                    |                     |  |  |  |  |
| 3.   | Fiscal Year:<br>2022–23  | 4. Index Code: 0190 |                             | 5. PCA Code: 23668 |                     |  |  |  |  |
| 6.   | School (SACS) Accounting Codes: Revenue Object Code: 8520 Resource Code: 5380                            |                     |                             |                    |                     |  |  |  |  |
| 7.   | Total of This Request:<br>\$778,030.20   |                     |                             |                    |                     |  |  |  |  |
| 8.   | Program Contact For Questions  | Regarding This Re   | equest:                     |                    |                     |  |  |  |  |
|  | me:<br>a Bassin  |                     | Title:<br>Analyst           |                    |                     |  |  |  |  |
| Uni<br>Fin   | t:<br>ancial Management Unit   |                     |                             |                    | Phone: 916-319-0403 |  |  |  |  |
| 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. |  |                     |                             |                    |                     |  |  |  |  |
|  | me: (Print or Type)<br>n Frinzell  |                     | Title:<br>Division Director |                    |                     |  |  |  |  |
| Signature:   |  |                     | Date:                       |                    |                     |  |  |  |  |
| 10.  | 0. Attach a schedule of payments with sub-totals by county and district.                                 |                     |                             |                    |                     |  |  |  |  |
| 11.  | 1. 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.              |                     |                             |                    |                     |  |  |  |  |