

**Workforce Innovation and Opportunity Act, Title II**

VCOE  
Deposit date  
CR197896  
110-8290-3913

**Fiscal Year 2022–23 LEA**

<b>Quarter</b>	<b>County Treasurer</b>	<b>PCA</b>	<b>Resource Code</b>	<b>Project Code</b>	<b>Service Location Field</b>	<b>Grantee</b>	<b>Payment Amount</b>
2	Ventura	14508	3905	39	73759	Conejo Valley Unified School District	\$85,462
2	Ventura	13978	3913	41	73759	Conejo Valley Unified School District	\$10,083
2	Ventura	14109	3926	42	73759	Conejo Valley Unified School District	\$38,572
<b>Statewide Total</b>							<b>\$134,117</b>

## Request for Payment of a Non-Formula Grant

Date:  
2/6/23

**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:**

Workforce Innovation and Opportunity Act, Title II: Adult Ed. and Family Literacy Act, Public Law 113-128

**3. Fiscal Year:**

2022-23

**4. Index Code:**

0615

**5. PCA Code:**

See Attached

**6. School (SACS) Accounting Codes:**

Resource Code: See Attached

Revenue Object Code: 8290

**7. Total of This Request:**

\$4,223,746

**8. Program Contact For Questions Regarding This Request:**

**Name:**

Charlie Brenneman

**Title:**

AGPA

**Unit:**

Adult Education Office

**Phone:**

916-323-5635

- 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)**

Pete Callas

**Title:**

Division Director

**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.**