

**Valley Education for Employment System (VALEES)
Perkins Request for Payment**

SAMPLE

Request Information

Date of Request: 9/20/11

District Name: My School District #1

Grant Contact Making Request: Mary Smith

Phone Number for Grant Contact: 800-555-1212

E-mail Address for Grant Contact: msmith@district1.com

Amount of Request: \$ 10,000

Account Number(s) to be Used: Acct. #1000-400 Supplies = \$5,000
Acct. #2210-300 Purchased Services = \$5,000

Expenditure Description (please be specific): Supplies and materials for CTE approved programs (i.e. CAD, Foods and Auto)

Type of Request

Reimbursement (**Recommended**) - Must attach receipt or paid invoice

Request for "Modified Advance" (**Not Recommended**) - Must attach PO and expend w/in 30 days upon receipt of funds. (**Important Note:** The Modified Advance represents the amount of money the LEA must have in advance, *must be* in alignment with the actual expenditures anticipated for the Federal grant, and LEA commits to expend to meet immediate cash needs through the end of the next month. Expenditure report must be submitted to VALEES prior to submission of any future requests for payment.)

Mary Smith

9/21/11

Authorized Signature (Grant Contact)

Date

(Office Use Only)

Date Request Received:

Date Funds Distributed:

VALEES Check Number:

Date Documentation Received for Modified Advance:

_____ VALEES Office Manager

_____ VALEES Director