

Apportionment Bulletin

Date: 11-14-23

Bulletin No. 24-132A

TO: San Bernardino County School Districts
Chief Business Official and Directors of Accounting

SUBJECT: Individuals with Disabilities Education Act/American Rescue Plan 611 Local Assistance Entitlements

Enclosed are the following documents for your district:

1. Letter from the California Department of Education dated 11/08/2023.
2. Distribution Schedule

The income from this apportionment **WILL BE** deposited into the following account:

Fiscal Year	21-22
Resource	3305
Fund	01
Revenue Account	8182
PCA	15638
District	Various

Please forward this information to the appropriate district staff. Notification will be sent to the district once funds are released for posting.

Apportionment Bulletins and back up documentation are posted at:

The Apportionment Summary, which is updated monthly as of the 10th working day of every month, is posted at: <http://www.sbcss.k12.ca.us/index.php/business-services/business-advisory-services/apportionments>. (Includes revenue deposited as of the last working day of the previous months).

If you have any questions, please contact Tamika Murray at (909) 386-9682 or tamika.murray@sbcss.net.

Sincerely,
Signed by Tamika Murray
Accountant
Business Advisory Services

cc: Tamika Murray, Accountant
Business Advisory Services

Grant Payments									
Individuals with Disabilities Education Act/American Rescue Plan 611 Local Assistance Entitlements									
Fiscal Year 2021-22									
County Code	County Treasurer	FI\$CAL Supplier ID	FI\$CAL Address Sequence ID	PCA	Service Location Field	Suffix	Grantee	SELPA¹ Code	Payment Amounts
36	San Bernardino	0000011839	4	15638	10363	01	San Bernardino County Office of Education	3601	\$ 344,642.02
36	San Bernardino	0000011839	4	15638	10363	04	San Bernardino County Office of Education	3651	\$ 6,112.00
36	San Bernardino	0000011839	4	15638	67777	01	Morongo Unified School District	3611	\$ 789.00
County Total									\$ 351,543.02
California Department of Education									
Special Education Division									
Index 0663, Program Cost Account 15638									
Standardized Account Code Structure (SACS)/Revenue Object Code: 8182									
SACS/Resource Code: 3305									
Special Education Local Plan Area ¹									

County Treasurer Summary of Payments							
Individuals with Disabilities Education Act/American Rescue Plan 611 Local Assistance Entitlements							
Fiscal Year 2021–22							
County Code	County Treasurer	Payment Amounts	Vouchers				
36	San Bernardino	\$ 351,543.02	00388881				
County Total		\$ 351,543.02					
California Department of Education							
Special Education Division							
Index 0663, Program Cost Account 15638							
Standardized Account Code Structure (SACS)/Revenue Object Code: 8182							
SACS/Resource Code: 3305							

Request for Payment of a Non-Formula Grant

Date:
November 8, 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:
Individuals with Disabilities Education Act/American Rescue Plan 611 Local Assistance Entitlements

3. Fiscal Year:
2021-22

4. Index Code:
0663

5. PCA Code:
15638 FINAL

6. School (SACS) Accounting Codes: Revenue Object Code: 8182
Resource Code: 3305

7. Total of This Request:
\$85,229,916.40

8. Program Contact For Questions Regarding This Request:

Name:
Shannon Lam, SEDgrants@cde.ca.gov

Title:
Associate Governmental Program Analyst

Unit:
Fiscal Payments I Unit, Grants

Phone:
916-327-3508

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:
Interim 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.**