

## Apportionment Bulletin

Date: 03-14-24

Bulletin No. 24-259A

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

SUBJECT: AME Workforce Training Program – First Payment

Enclosed are the following documents for your district:

1. Letter from the California Department of Education dated 02/06/2024.
2. Distribution Schedule

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

Fiscal Year	23-24
Resource	6385
Fund	01
Revenue Account	8590
PCA	25253
District	Apple Valley USD

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 10<sup>th</sup> 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](mailto:tamika.murray@sbcss.net).

Sincerely,  
*Signed by Tamika Murray*  
Accountant  
Business Advisory Services

cc: Tamika Murray, Accountant  
Business Advisory Services

## Request for Payment of a Non-Formula Grant

Date:  
February 6, 2024

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:  
AME Workforce Training Program -- First Payment

3. Fiscal Year: 2023	4. Index Code: 0615	5. PCA Code: 25253
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6. School (SACS) Accounting Codes: Revenue Object Code: 8590  
Resource Code: 6385

7. Total of This Request:  
~~\$739,200~~

**Revised Total = \$715,200**

8. Program Contact For Questions Regarding This Request:

Name:  
Michelle Upton

Title:  
AGPA

Unit:  
Academy, Apprenticeship, and Internship Office

Phone:  
916-445-7755

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:  
Director, Career and College Transition Division

Signature:



**Pete Callas**

Digitally signed by Pete Callas  
Date: 2024.02.07 14:20:06 -08'00'

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.**

**GRANT AWARD NOTIFICATION ENCUMBRANCE LIST**

**Arts, Media, and Entertainment (AME) Sector Leadership Project**  
**AME Workforce Training Grants**  
**Proposition 98 — Career Technical Education Initiative**  
**FY 2023-2024 First Payment**  
**Index 0615 — PCA 25253**

County Treasurer	County Code	FI\$Cal Supplier ID	FI\$Cal Address Sequence ID	PCA	Service Location Field	Suffix	District	School	Grant Amount	First Payment Amount (80% of Grant Amount)
San Bernardino	36	0000011839	4	25253	75077	W01	Apple Valley Unified School District	Granite Hills High School	\$ 50,000	\$ 40,000
<b>County Total</b>									<b>\$ 50,000</b>	<b>\$ 40,000</b>

California Department of Education

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**Arts, Media, and Entertainment (AME) Sector Leadership Project**

**AME Workforce Training Grants**

**Proposition 98 – Career Technical Education Initiative**

**FY 2023–24      1st Payment**

**Index 0615 – PCA 25253**

<b>County Code</b>	<b>County Name</b>	<b>Amount</b>	<b>Vouchers</b>
36	San Bernardino	\$ 40,000	00406947
	<b>County TOTAL</b>	<b>\$ 40,000</b>	