



## Apportionment Bulletin

Date: 09-13-22

Bulletin No. 23-046A

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

SUBJECT: California Partnership Academies: CLFPP Supplemental Final Payment

Enclosed are the following documents for your district:

1. Letter from the California Department of Education dated 08-25-2022.
2. Distribution Schedule

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

Fiscal Year	21-22
Resource	6385
Fund	01
Revenue Account	8590
PCA	25220
District	San Bernardino City Unified

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:

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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:  
August 25, 2022

**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:  
California Partnership Academies: CLFPP Supplemental Final Payment

3. Fiscal Year:  
2021

4. Index Code:  
0615

5. PCA Code:  
25220

6. School (SACS) Accounting Codes: Revenue Object Code: 8590  
Resource Code: 6385

7. Total of This Request:  
\$7,111

8. Program Contact For Questions Regarding This Request:

Name:  
Allegra Alessandri/Cindy Rose

Title:  
Administrator/AGPA

Unit:  
High School Innovations and Initiatives Office

Phone:  
319-0475

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:  
▶

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.**

**FI\$Cal -California Partnership Acadmeies: California Labor Federation Partnership Project Supplemental  
Fiscal Year 2021-22**

County Treasurer	County Code	FI\$Cal Supplier ID	FI\$Cal Address Sequence ID	PCA	Service Location Field	Suffix	Grantee	SCHOOL	Academy	CPAID	Grant Amount	Payment 1	Final Payment
San Bernardinc	36	0000011839	4	25220	66977	MC	San Bernardino City Unified School District	Arroyo Valley High School	Culinary Organic Recyclable Environment (C.O.R.E.) Academy	C002	\$5,469	\$4,922	\$547
<b>County Total</b>											<b>\$5,469</b>	<b>\$4,922</b>	<b>\$547</b>

**County Summary of the  
California Partnership Academies:  
California Labor Federation Partnership  
Project Supplemental  
Fiscal Year 2021–22**

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<b>County Code</b>	<b>County Name</b>	<b>Amount</b>
36	San Bernardino	\$547
<b>County Total</b>		<b>\$547</b>