

**ADVANCE PAYMENT REQUEST FOR THE
21ST CENTURY COMMUNITY LEARNING CENTER PROGRAM "**

Ms. Susan D'Annunzio
PA Department of Education
Division of Student Services
333 Market Street, 5th Floor
Harrisburg, PA 17126-0333

Dear Ms. D'Annunzio,

Please process this request for 25% of our Year 1 grant amount advance payment to our 21st Century Community Learning Center contract. ""

"" X 25% =

(example Year 1 Grant Amount \$100,000 X 25% = \$25,000)

Sincerely,

"
"
"
"

NOTE: This advance payment request must be signed, scanned and emailed to the Division of Student Services and will not be processed until you have a fully executed contract, if your application is selected for funding. Email to: sdannunzio@pa.gov.

*Do Not Write in this Box
PDE Use only*

Year one Award Amount \$ _____

Advance Payment Request Amount \$ _____

Advance Payment Request Satisfied on Expenditure Reports:

Date: _____ Amount : _____ Processed Date: _____ Balance of Advance Pay to Satisfy: \$ _____

Date: _____ Amount: _____ Processed Date: _____ Balance of Advance Pay to Satisfy: \$ _____

Date: _____ Amount: _____ Processed Date: _____ Balance of Advance Pay to Satisfy: \$ _____

Date: _____ Amount: _____ Processed Date: _____ Balance of Advance Pay to Satisfy: \$ _____