

COMMONWEALTH OF VIRGINIA
Department of Education
Office of Career and Technical Education Services
P.O. Box 2120
Richmond, VA 23218-2120

REQUEST FOR REIMBURSEMENT

for Carl D. Perkins Vocational and Technical Education Federal Funds

School Division _____

Reimbursement # 1 2 3 4 5 6 7 8 9 10 11 12
(Please check)

hereby claims reimbursement for disbursements made during the period _____ , _____
to _____ , _____ under the provisions of the Carl D. Perkins Vocational and Technical
Education Act of 1998. This is to certify that the **expenditures listed in this reimbursement have been paid**
paid in accordance with the State approved local plan, Federal/State policies, and regulations of the
Department of Education. It is further certified that **documentation is retained and available in the local agency**
local agency to support this claim and is subject to Federal and State audits. I further certify that **no**
estimated or advanced payments are included in this request.

2003-2004 Perkins Allocation \$ _____
Amount Claimed to Date \$ _____
Amount Claimed in this Request \$ _____
Balance of Perkins Allocation \$ _____

Reimbursement Prepared by _____
(Name)

Preparer's Telephone # _____ Preparer's FAX # _____

_____ Date _____ Career & Technical Administrator's Signature

_____ Date _____ Superintendent's or Authorized Signature

-----For Department of Education Use Only-----

Amount of Payment \$ _____ Approved for Payment _____

Project Code 61095 Program Code 171-03-50 Date _____

Mail form to Becky Marable, Grants Administrator, at the above address