

**SAMPLE  
ADVANCE PAYMENT REQUEST FOR THE  
21ST CENTURY COMMUNITY LEARNING CENTER PROGRAM  
(PLEASE TYPE ON YOUR AGENCY'S LETTERHEAD)**

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.  
(show year 1 grant amount) X 25% = (show advance payment amount)  
(example Year 1 Grant Amount \$100,000 X 25% = \$25,000)

Sincerely,  
[Authorized Representative for Agency]

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](mailto: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: \$ \_\_\_\_\_