

APPLICATION FOR REIMBURSEMENT FOR SCHOOL CONSTRUCTION PROJECT

Send to Bureau of Commonwealth Accounting, Special Accounting Division, Central Agencies and School Finance,
555 Walnut Street, 9th Floor, Harrisburg, PA 17101. For additional information, go to www.education.state.pa.us.
Click on "Programs." Click on "Programs S-Z." Click on "School Construction and Facilities."
Click on "Reimbursable Projects." Click on "Forms and Instructions." Click on "Reimbursement Application."

LEA NAME: _____	PDE LEASE #: _____
COUNTY: _____	AUN: _____
Amount of Issue, Note or Loan: _____	COMPTROLLER'S USE ONLY
Scheduled Payment Date: _____	
	PAY DATE _____
	VT. NO. _____

Has this issue been refinanced or restructured since the last scheduled payment? YES NO

If so, confirm that PlanCon Part K was completed and submitted to PDE and that you have received the PlanCon Part K approval letter; do **not** submit the PDE-2071 until you receive the PlanCon Part K approval letter from PDE.

Is this the final payment on this issue? YES NO

1. TOTAL SCHEDULED PAYMENT (as per Part H or K approved payment schedule)	\$ _____
2. Non-reimbursable Amount	
a. Administrative Expenses	\$ _____
b. Sale of Buildings and Land	\$ _____
c. Rental Income	\$ _____
d. Insurance Income	\$ _____
e. Adjustments (Use higher of Part H or K approval plus bank credit)	\$ _____
f. Escrow Account	\$ _____
g. Federal Subsidy (BAB, QSCB & QZAB)	\$ _____
h. Other, specify _____	\$ _____
i. Total Non-Reimbursable Amount (Sum Items a through h)	\$ _____
3. Total Eligible Amount (Item 1 minus Item 2.i.)	\$ _____
4. Reimbursable Percentage (Per Part H, J or K Approval Letter)	_____
Area Vocational Technical Schools, Career and Technical Centers, and Special Schools, omit Items 5-7; complete Page 2 and sign below.	
5. Eligible reimbursable amount (Item 3 times Item 4)	\$ _____
6. Applicable Aid Ratio (The greater of the Permanent Capital Account Reimbursement Fraction; minimum fraction (.5000) for Density; or Market Value Aid Ratio)	_____
7. Reimbursable Amount (Item 5 times Item 6)	\$ _____

The facilities financed under this lease number are being used for classroom activities, or for the originally approved purpose, or have been granted an exception by the Department of Education pursuant to Section 349.28 of the School Building Standards. I certify that the information provided above is true to the best of my knowledge.

Contact Person	Contact Person's email address	() _____	() _____	Phone Number	Fax Number
Signature, Chief School Administrator	Name, Chief School Administrator (typed or printed)			Date	

TRUSTEE OR PAYING AGENT: COMPLETE THE SECTION BELOW AND RETURN TO SCHOOL DISTRICT, AREA VOCATIONAL TECHNICAL SCHOOL, CAREER AND TECHNICAL CENTER, OR SPECIAL SCHOOL.

A. Total Scheduled Payment for the above-referenced bond, issue or note	(Payment must match approved schedule)	\$ _____
B. Credits		
1. <u>First scheduled payment</u> - This credit represents accrued interest and surplus funds less than \$10,000 from the bond closing in the amount of: _____	\$ _____	(Non-reimbursable, see Item 2.e. above)
2. <u>Escrow Account</u> - This credit represents excess funds from the <u>closing</u> of the escrow account in the amount of: _____	\$ _____	(Non-reimbursable, see Item 2.f. above)
3. <u>All other payments</u> - This credit represents interest earnings due to early deposits of payments or monies held for unrepresented items in the amount of: _____	\$ _____	(Reimbursable - Do <u>not</u> deduct from above)
4. <u>Other credit applied</u> (Explain) _____	\$ _____	
If this is an authority issue, have any bonds been redeemed in advance of the original amortization schedule?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
C. Actual Payment Made by School District, AVTS, CTC or SS (Item A minus Item B)		\$ _____
D. Funds Available (after this scheduled payment)		\$ _____
E. Principal Outstanding (after this scheduled payment)		\$ _____
NOTE: For Capital Appreciation Bonds, use maturity value.		

Name, Trustee or Paying Agent (typed or printed)	() _____	Phone Number
Signature		Date