INTRUCTIONS

FINAL PAYMENT REQUEST

The following information is provided to assist you in completing the forms required for the Final Payment Request.

Final Payment Request for Reimbursement of Expenses: Please provide **two (2)** copies each of all items #1 through #4.

1. **SLP-10-F Private Agency Final Expenditure Report** completed in accordance with the instructions appearing on that form.

    a. Please prepare your report in order to recap the details about your total expenses that were incurred during your contract period.

    b. Complete the “Agency Name” and "Contract#" entry on the last page.

    c. The beginning and ending dates of employment reported for any budgeted salaries claimed **must** be within the term of the contract. They should reflect the period actually worked during the project supported by the contract.

    d. At least **ONE** of the two copies must include an **original signature** for the authorized agency official in the "Chief Administrator's Certification" entry on the last page.

2. **State Aid Voucher** (complete only boxes 2, 4, 6, & 8)

    a. The "Description of Charges Section" of Item 6 should be completed with the following phrase: "See Attached SLP-10-F Final Expenditure Report for Contract # _____" and

    b. The amount entered on the "Total" line should be the difference between the amount appearing as the "Grand Total" on page 6 of the completed SLP-10-F Final Expenditure Report and the amounts previously paid to you.

3. **The final narrative report** which summarizes all activities occurring in the program and financial areas of the grant.

4. **Equipment Inventory Form**: Only if applicable.

5. **Retain a photo copy of all forms for your files.**

PLEASE MAIL TO:

New York State Education Department
Bureau of Fiscal Management P.O. Box 7256
Albany, NY 12224