Explanation/Correction of Student Transportation Costs of $6,500+
Verified and Stopped On-Line for Summer Section 4408 & 4201 Students

Year: _____ **CSE District Code:** _____ **CSE District Name:** _____

Enter 6-digit STAC ID	Last Name, First Name	Education Provider Name	Verified ACTUAL Student Trans Cost**	Placement Type: 4408 -DVSTR, 4408 Rel Serv-DVST2, 4201-DVST3, or Chapter-DVSTC

**If corrected cost is greater than $6,499/$5,999, attach a copy of the student transportation invoice or a detailed calculation to support your transportation claim.

Signatures of Superintendent/Business Official and CSE Chairperson are required

Superintendent/Business Official Signature	Title	Telephone #	Date
CSE Chairperson Signature	Title	Telephone #	Date

Return by mail to:

Kelly Mason

STAC and Medicaid Unit

89 Washington Avenue,
Room 514 EB Albany, New York 12234

or by Fax (518) 402-5047

For questions call (518) 474-7116