

## BAAS Reconciliation – 21<sup>st</sup> CCLC Cover Sheet (FY 2024)

<i>LEA Organization Name</i>	
<i>LEA Organization Number</i>	
<i>Cohort Number</i>	<input type="checkbox"/> Cohort 16 <input type="checkbox"/> Cohort 15  (If your program has multiple Cohorts, please submit each Cohort separately)
<i>Amount Requested</i>	
<i>BAAS Reporting Month</i>	

To avoid ERaCA disablement, utilize one of these options:	
Email Supporting Documents	NCDPI Google Drive
Email <b>Melba.Strickland@dpi.nc.gov</b> and your <b>Fiscal Team</b> (East or West) on the Tuesday before your Fiscal Monitoring.  <b>Fiscal Team East:</b> Ashton.Moss@dpi.nc.gov <b>Fiscal Team West:</b> Katrina.Blount@dpi.nc.gov and Monica.Pask@dpi.nc.gov	Upload Supporting Documents in your NCDPI Folder. Then share with both <b>Melba.Strickland@dpi.nc.gov</b> and your <b>Fiscal Team</b> (East or West) on the Tuesday before your Fiscal Monitoring  <b>Fiscal Team East:</b> Ashton.Moss@dpi.nc.gov <b>Fiscal Team West:</b> Katrina.Blount@dpi.nc.gov and Monica.Pask@dpi.nc.gov

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I attest that the organization is submitting accurate and complete information for this reimbursement request.

Signature of Fiscal Agent Organization Chief Administrator for the LEA as Listed on the Basic  
Program Information Form

Date

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#### NCDPI Google Drive

Upload Supporting Documents in your NCDPI  
Folder. Then share with  
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