

Part 1: October 2013 Enrollment Audit Verification

This form also serves as a **Request for Appropriations Disbursement** for Public Charter Schools

FY 2013-2014

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This	s form must be comple	ted by ALL LEAs		
Please submit complet	ed application electronication	ally and with the orig	inal signatures.	
EA Name:	Date:	EIN (if P	CS):	
General	Information (PCS only	-DCPS go to Part 2	<u>2)</u>	
Please check one of the follow	wing to identify the charte	ering authority that a	pproved your cha	irter:
D.C. Board	of Education D	.C. Public Charter Sc	hool Board	
PCS Name:				
PCS Address:				
PCS Phone Number:				
E-mail Address:				
PCS Sponsor/Management Company:				
(If not applicable, please leave I	olank)			
<u>Nam</u>	nes and Contact Inform	nation (PCS only)		
PCS Board of Trustees Chairman:			Phone:	
PCS Principal:				
CS Financial Officer:				
<u>Fina</u>	ncial Institution Inform	nation (PCS Only)		
inancial Institution Name:				
PCS Bank Address:				
PCS Bank Account Title:				
Type of Accounts: Checking	Savings			
Account Number:				
(Account number appearing on monthly st	atements, not at the bottom of	FPCS checks.)		
Bank Contact Person and Phone Number:				
ABA Routing Number:				
(Please contact your bank for these num	bers. Do not type the numbers	at the bottom of checks.)		
We, District of Columbia Public School Offic Longitudinal Education Data (SLED) system current enrollment as of October 7, 2013.				
Head of LEA			Date	-
LEA Financial Officer (PCS only)			Date	-
Chairperson of the Board of Trustees (PCS only)			Date	-
Executive Director of Public Charter School Boa	ard (completed by PCSR upon s		Date	-
Executive Director of 1 upic Charter School Boa	Ta (completed by I Cob upon so	aomission)	Duic	l