

**Date:**

**From:**

**To:** California Community College Chancellor’s Office and  
Kern Community College District- Central/Mother Lode Regional Consortium Fiscal Agent

**RE: FINAL Expenditure and Match Certification – CLOSE OUT**  
**[Name of K12 SWP Project as written in NOVA]**

**Allocation Year:** 24/25 Allocation (Round 7)  
**Grant Performance Period:** January 1, 2025 through June 30, 2027

**GRANT AWARD**

<b>Expenditure Type</b>	<b>Final Expenditures For Grant Performance Period (Cumulative)</b>
Instructional Salaries (1000)	\$
Non-Instructional Salaries (2000)	\$
Employee Benefits (3000)	\$
Supplies and Materials (4000)	\$
Other Operating Expenses and Services (5000)	\$
Capital Outlay (6000)	\$
Other Outgo (7000)	\$
Indirect Costs	\$
<b>Total</b>	<b>\$</b>

Per the [CA Community College Chancellor’s Office](#), match expenditures must directly benefit the pathway(s) that are the focus of the project. Providers of match should expect to provide auditable documentation of the expenditure of the match upon request.

**FINANCIAL MATCH (CASH MATCH)**

<b>Expenditure Type</b>	<b>Final Financial Match For Grant Performance Period (Cumulative)</b>
Instructional Salaries (1000)	\$
Non-Instructional Salaries (2000)	\$
Employee Benefits (3000)	\$
Supplies and Materials (4000)	\$
Other Operating Expenses and Services (5000)	\$
Capital Outlay (6000)	\$
Other Outgo (7000)	\$
Indirect Costs	\$
<b>Total</b>	<b>\$</b>

**Certification:**

I, \_\_\_\_\_ hereby certify to the best of my ability that the expenses claimed for all expenditures above are accurate and reflect payroll and direct expenses related to supporting the Strong Workforce Program in achieving its intended outcomes. All documentation on this invoice will be supplied upon request.

\_\_\_\_\_  
Signature

Name, Title:  
Name of Organization:  
Email:  
Phone:

INSTRUCTIONS: Include a separate certification form for each entity providing match. This could include the awardee LEA, industry partner, community-based organization, community college partner or other.

Upload to NOVA with your reporting.