

## 764/81 DEFERRED MAINTENANCE - CCD DISTRICT STATISTICS REPORT

District San Mateo CCCD

The state requires the following cost accounting statistics be reported to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS								
	01-2	02-3	03-4	04-5	05-6	06-7	07-8	08-9	09-10
1. Was a "Scheduled Maintenance Five-Year Plan" (241/SM5Y) submitted to the Chancellor's Office?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
2. Was a "Scheduled Maintenance Project Funding Proposal" (241/SM/PFP) submitted to the Chancellor's Office?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
3. Was a "Hazardous Substances Project Funding Proposal" (241/HS/PFP) submitted to the Chancellor's Office?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
4. The amount of district funds expended to provide the required deferred maintenance matching contribution during the fiscal year.									
5. Number of claims submitted to the Chancellor's Office for Scheduled Maintenance work completed or in progress during the fiscal year.									
6. Number of claims submitted to the Chancellor's Office for Hazardous Substance Projects during the fiscal year.									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

If you have any questions, please contact Raymond Chow, at 358-6742.

PLEASE SUBMIT THIS INFORMATION BY \_\_\_\_\_; TO Suki Chang.