

1. Submitted on Sponsor Letterhead
2. Please be sure to include the State grant number and billing number (1, 2,...final) in the subject line.
3. Send package to: AeronauticsGL@dot.ca.gov

(Date)

Grants and Loans Specialist

Subject: (Airport Name)-State Grant (enter State grant number) Reimbursement  
(Billing Number)

To whom it may concern:

In accordance with Section III of the State Grant Agreement (State Grant Agreement Number) for (Airport Name) – matching FAA Grant (AIP Grant Number), we are requesting payment in the amount of (Enter Dollar Amount). This payment request includes the 10 percent retention. A copy of FAA Payment Claim (Enter Claim Number) as well as the corresponding proof of funds receipt is enclosed.

If you have any questions, please call (phone number) or email at (email).

Sincerely,

(Signature Block)