

GRANTEE LETTERHEAD

Current Date

Orange County Children and Families Commission
17320 Redhill Avenue, Suite 200
Irvine, California 92614

Grantee Name is requesting an initial payment/advance of \$_____, which is _____% of the Maximum Payment Obligation (\$ Amount) on Grant Agreement No. _____.

Provide brief explanation of why initial payment/advance is needed:

Please remit to: Grantee Name
 Grantee Complete Address, including City, State & Zip Code

Sincerely,

Name/Title (Authorized Signature)

If you have any questions regarding this request, please contact: Contact Name, Phone Number and Email Address.