

Instructions for Completing CDA 30

The Title V/ OARR Request for Funds form (CDA 30) is designed for requesting monthly reimbursement funds for the Title V/ OARR programs. All requests for funds entered into the CDA 30 should be rounded to the nearest dollar.

The Title V/ SCSEP request for funds will be entered into the CDA online Local Finance Reporting System (LoFRS). Please email finance@aging.ca.gov for user access to LoFRS. Submitted invoices must reflect the amount of expenses incurred for that period.

HEADER SECTION:

Enter the following information:

- Planning and Service Area (PSA) number [assigned two digit contract extension]
Example (TV 2122-##)
 - Remit to Name and Address will auto-populate once the PSA # is entered
- Fiscal Year - State Fiscal Year
- Contract Number - Will auto-populate once the Fiscal Year and PSA # are entered
- Invoice Date - Date the report is being submitted

REQUEST FOR FUNDS:

Enter the month and year for which funds are being reimbursed.

Enter Funds requested for Contractor Administration, Program Other and PWFB.

Reimbursement amounts must agree with the corresponding expenditures.

FOR STATE USE ONLY:

This section is to be completed by CDA staff.

SUBMISSION DUE DATES:

The completed CDA 30 must be sent as an e-mail attachment to the [Fiscal Email Address: Finance@aging.ca.gov](mailto:Finance@aging.ca.gov). Signatures of the AAA director and staff are not required.

See contract language for due dates.

In your email subject line, please identify your PSA ##, Program, and Current Month Request for Funds being submitted (Example: PSA 34 TV Sep RFF FY22).

Once approved, you will receive a signed copy of the CDA 30, to include documentation reflecting any CDA adjustments, via email. Please adjust your records to reflect any CDA adjustments.