

NEW YORK STATE DEPARTMENT OF LABOR

Local Workforce Development Area (LWDA) Transmittal of Closeout Documents

Various Federal Programs and Fiscal Years

TO:

NYS Department of Labor
Div. of Employment and Workforce Solutions
Office of Workforce Investments
State Office Campus, Building 12, Room 436
Albany, New York 12240

FROM:

Name:
Telephone:
LWDA's Name & Address:

As required by NYS Workforce Development System Technical Advisory #17-4, dated May 16, 2017, I have taken action related to the closeout of the following federal sub-grants and I am enclosing the required documents (check all appropriate items).

WIOA TITLE 1B

Youth (PY19)

Administration (PY19)

Adult (PY19)

Dislocated Worker
(PY19)

Adult transferred for
DW (PY19)

DW transferred for
Adult (PY19)

**OTHER FEDERAL
PROGRAMS**

TAA (FY19)

TET NDWG (PY18)

Opioid NDWG (PY18, PY20)

DEI Round 8 (PY17)

CERTIFICATION

I certify that the information contained on this page as well as my final report is true and complete to the best of my knowledge. I further understand that this is a final closeout and that no additional costs may be charged against any of the program categories checked above.

(Name)

(Title)

(Signature)

(Date)