DLS
DIVISION OF LOCAL SERVICES
MA DEPARTMENT OF REVENUE

Michael J. Heffernan
Commissioner of Revenue

Sean R. Cronin
Senior Deputy Commissioner

STATE HOUSE NOTE PROGRAM SCHOOL ASSESSMENTS FORM

_____ *, Regional School District*

Information to be filed with each loan in Anticipation of Revenue in Addition to Cash Flow Statement and Other Required Documents

I certify that the following are the amounts of the assessments on the member municipalities, the estimated receipts, which were used to reduce the district assessments, and the amounts, which have been received in the various categories in this fiscal year:

	Total	Amount Received to Date	Balance to be Received
Assessments	$	$	$
Chapter 70			
Transportation Reimbursement			
Other Grants or Aid (Specify Source)			
Total	$		

_____ _____

Date *District Treasurer*

(Revised: May 2016)