

200 Prospect Street
East Stroudsburg, PA
18301-2999



15 May 2006

Dear Dr. Mitchell,

I am writing to request an extension on my National Park Service grant "Appalachian Trail Mammal Inventory for Pennsylvania, New Jersey, New York, and Connecticut: 460 Trail Miles." Work on this project is nearly complete, and I have already submitted a draft report to you. However, I believe that with an extension I could improve the quality of this inventory. In particular, an extension would allow me to:

- Gather additional data on mammals within the AT corridor through the use of wildlife reconnaissance cameras
- Finish the preparation of voucher specimens
- Complete the data entry and preparation of metadata
- Make changes in the report as recommended by external reviewers.

I am requesting an extension of one year. This would put the deadline for completion of all deliverables and submission of a peer-reviewed final report at 15 June 2007.

Please contact me if you have any questions about this extension. Thanks very much.

Sincerely,

Howard P. Whidden

Howard P. Whidden, Ph.D.
Department of Biological Sciences
East Stroudsburg University
East Stroudsburg, PA 18301

U.S. DEPARTMENT OF THE INTERIOR, NATIONAL PARK SERVICE - INVOICE TRANSMITTAL

NORTHEAST REGION
PHILADELPHIA OFFICE
Tuesday, September 18, 2007

Page 1 of 1

Mail Remittance To:

East Stroudsburg University of PA
200 Prospect Street
East Stroudsburg, PA 18301-2999

REF # 224

Document Number: CA4560040069					
Cost Account	Amount	Doc. No.	FFS Line	SA	Amend. Voucher No
2108-6210-NII	\$4,098.83	0	0	1	0 6
Total Amount:		\$4,098.83			

APPROVED FOR PAYMENT



Brian R. Mitchell
NETN Coordinator

U.S. DEPARTMENT OF THE INTERIOR, NATIONAL PARK SERVICE - INVOICE TRANSMITTAL

NORTHEAST REGION
PHILADELPHIA OFFICE

Wednesday, December 28, 2005

Page 1 of 1

Mail Remittance To:

REF # 188

Document Number: CAH4560040069

Cost Account	Amount	FFS Line	SA	Amend.	Voucher No
2108-6210-NII	\$4,376.18	0	1	0	1
2108-6210-NII	\$20,385.28	0	1	0	2
2108-6210-NII	\$26,320.23	0	1	0	3
Total Amount:	\$51,081.69				



Brian R. Mitchell January 17, 2006

U.S. DEPARTMENT OF THE INTERIOR, NATIONAL PARK SERVICE - INVOICE TRANSMITTAL

NORTHEAST REGION
PHILADELPHIA OFFICE
Tuesday, August 02, 2005

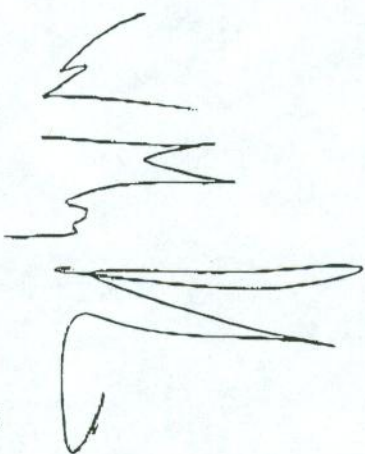
Page 1 of 1

Mail Remittance To:

REF # 189

Document Number: CAH4560040069

Cost Account	Amount	FPS Line	SA	Amend.	Voucher No
2111-6210-NII	\$20,385.28	0	1	0	2
Total Amount:					
	\$20,385.28				



2 Aug 2005

COPY

REQUEST FOR ADVANCE OR REIMBURSEMENT

(See instructions on back)

OMB APPROVAL NO.

0348-0004

PAGE 1 OF 1 PAGES

1.
TYPE OF
PAYMENT
REQUESTED

a. "X" one or both boxes

☐ ADVANCE ☒ REIMBURSE-
MENT

b. "X" the applicable box

☐ FINAL ☒ PARTIAL

2. BASIS OF REQUEST

☐ CASH☒ ACCRUAL3. FEDERAL SPONSORING AGENCY AND ORGANIZATIONAL ELEMENT TO
WHICH THIS REPORT IS SUBMITTED

United States Department of the Interior

4. FEDERAL GRANT OR OTHER
IDENTIFYING NUMBER ASSIGNED
BY FEDERAL AGENCY

H4560040069

5. PARTIAL PAYMENT REQUEST
NUMBER FOR THIS REQUEST

Three (3)

6. EMPLOYER IDENTIFICATION
NUMBER

23-2504462

7. RECIPIENT'S ACCOUNT NUMBER
OR IDENTIFYING NUMBER

3032121505.1

8. PERIOD COVERED BY THIS REQUEST

FROM (month, day, year)

July 1, 2005

TO (month, day, year)

October 31, 2005

9. RECIPIENT ORGANIZATION

Name: East Stroudsburg University of PA SSHE

Number
and Street: 200 Prospect St.City, State
and ZIP Code: East Stroudsburg, PA 18301-2999

10. PAYEE (Where check is to be sent if different than item 9)

Name: Account #: 0649968278

Number
and Street: Routing #: 043000122City, State
and ZIP Code:

11. COMPUTATION OF AMOUNT OF REIMBURSEMENTS/ADVANCES REQUESTED

PROGRAMS/FUNCTIONS/ACTIVITIES ►	(a)	(b)	(c)	TOTAL
	10/31/2005			
a. Total program outlays to date (As of date)	\$ 53,635.77	\$	\$	\$ 53,635.77
b. Less: Cumulative program income	0.00			0.00
c. Net program outlays (Line a minus line b)	53,635.77	0.00	0.00	53,635.77
d. Estimated net cash outlays for advance period	0.00			0.00
e. Total (Sum of lines c & d)	53,635.77	0.00	0.00	53,635.77
f. Non-Federal share of amount on line e	2,554.08			2,554.08
g. Federal share of amount on line e	51,081.69			51,081.69
h. Federal payments previously requested	24,761.46			24,761.46
i. Federal share now requested (Line g minus line h)	26,320.23	0.00	0.00	~~46,705.51~~
j. Advances required by month, when requested by Federal grantor agency for use in making prescheduled advances				
1st month	0.00			0.00
2nd month	0.00			0.00
3rd month	0.00			0.00

12. ALTERNATE COMPUTATION FOR ADVANCES ONLY

a. Estimated Federal cash outlays that will be made during period covered by the advance	\$ 0.00
b. Less: Estimated balance of Federal cash on hand as of beginning of advance period	0.00
c. Amount requested (Line a minus line b)	\$ 0.00

AUTHORIZED FOR LOCAL REPRODUCTION

(Continued on Reverse)

STANDARD FORM 270 (Rev. 7-97)

Prescribed by OMB Circulars A-102 and A-110

CERTIFICATION

I certify that to the best of my knowledge and belief the data on the reverse are correct and that all outlays were made in accordance with the grant conditions or other agreement and that payment is due and has not been previously requested.

SIGNATURE OR AUTHORIZED CERTIFYING OFFICIAL



TYPED OR PRINTED NAME AND TITLE

Donna R. Bulzoni, Comptroller

DATE REQUEST
SUBMITTED

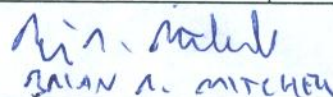
November 23, 2005

TELEPHONE (AREA
CODE, NUMBER,
EXTENSION)

P.Fazio, 570-422-3487

This space for agency use

APPROVED FOR PAYMENT



BRIAN A. MITCHELL

 NETW 12/24/05
COORDINATOR

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0004), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

INSTRUCTIONS

Please type or print legibly. Items 1, 3, 5, 9, 10, 11e, 11f, 11g, 11i, 12 and 13 are self-explanatory; specific instructions for other items are as follows:

- | Item | Entry |
|------|--|
| 2 | Indicate whether request is prepared on cash or accrued expenditure basis. All requests for advances shall be prepared on a cash basis. |
| 4 | Enter the Federal grant number, or other identifying number assigned by the Federal sponsoring agency. If the advance or reimbursement is for more than one grant or other agreement, insert N/A; then, show the aggregate amounts. On a separate sheet, list each grant or agreement number and the Federal share of outlays made against the grant or agreement. |
| 6 | Enter the employer identification number assigned by the U.S. Internal Revenue Service, or the FICE (institution) code if requested by the Federal agency. |
| 7 | This space is reserved for an account number or other identifying number that may be assigned by the recipient. |
| 8 | Enter the month, day, and year for the beginning and ending of the period covered in this request. If the request is for an advance or for both an advance and reimbursement, show the period that the advance will cover. If the request is for reimbursement, show the period for which the reimbursement is requested. |
- Note: The Federal sponsoring agencies have the option of requiring recipients to complete items 11 or 12, but not both. Item 12 should be used when only a minimum amount of information is needed to make an advance and outlay information contained in item 11 can be obtained in a timely manner from other reports.
- 11 The purpose of the vertical columns (a), (b), and (c) is to provide space for separate cost breakdowns when a project has been planned and budgeted by program, function, or

- | Item | Entry |
|------|---|
| | activity. If additional columns are needed, use as many additional forms as needed and indicate page number in space provided in upper right; however, the summary totals of all programs, functions, or activities should be shown in the "total" column on the first page. |
| 11a | Enter in "as of date," the month, day, and year of the ending of the accounting period to which this amount applies. Enter program outlays to date (net of refunds, rebates, and discounts), in the appropriate columns. For requests prepared on a cash basis, outlays are the sum of actual cash disbursements for goods and services, the amount of indirect expenses charged, the value of in-kind contributions applied, and the amount of cash advances and payments made to subcontractors and subrecipients. For requests prepared on an accrued expenditure basis, outlays are the sum of the actual cash disbursements, the amount of indirect expenses incurred, and the net increase (or decrease) in the amounts owed by the recipient for goods and other property received and for services performed by employees, contracts, subgrantees and other payees. |
| 11b | Enter the cumulative cash income received to date, if requests are prepared on a cash basis. For requests prepared on an accrued expenditure basis, enter the cumulative income earned to date. Under either basis, enter only the amount applicable to program income that was required to be used for the project or program by the terms of the grant or other agreement. |
| 11d | Only when making requests for advance payments, enter the total estimated amount of cash outlays that will be made during the period covered by the advance. |
| 13 | Complete the certification before submitting this request. |