



December 23, 2019

Santa Clara City Library  
Hilary Keith, City Librarian  
2635 Homestead Road  
Santa Clara, CA 95051-5322

[hkeith@santaclaraca.gov](mailto:hkeith@santaclaraca.gov)

Dear Ms. Keith:

I'm pleased to enclose a claim form for the remainder of your California Library Literacy Services funding for the 2019-2020 fiscal year. This **final, second payment** of your total allocation for the fiscal year that began July 1, 2019 is based on:

- A *per capita* amount per adult learner served at your library during the previous fiscal year.
- A *match* on local funds raised and expended for adult literacy services at your library during the fiscal year that ended June 30, 2019.

Earlier this year you received a baseline for your literacy program. The baseline reflects the importance of each library having enough funds to provide local literacy staffing and service.

Below is a summary of your total California Library Literacy Services funding for the current program year:

**Adult Literacy 2019/20**

Baseline Adult Literacy Services:	\$18,000 (amount previously claimed)
<b>Final Payment (Per Capita &amp; Match):</b>	<b>\$30,072 (amount to be claimed now)</b>

---

<b>GRAND TOTAL for Adult Literacy:</b>	<b>\$48,072</b>
--	-----------------

---

<b>Family Literacy Grant 2019/20</b>	<b>\$25,000</b>
--------------------------------------	-----------------

<b>Grand Total for ALS &amp; Family Literacy</b>	<b>\$73,072</b>
--	-----------------

Any changes in your funding from last year are based, in part, on an increase or decrease in the number of adult learners you served and/or the amount of local funds expended on your library literacy program last year.

We'll initiate the payment process upon receipt of your signed claim form and certification form which are attached. The forms serve as a request to claim the funds and have a check sent to you and a certification that your library will use the funds for the purpose intended.

This final payment will be processed after all reporting requirements from the prior fiscal year have been received, all adjustments made and unexpended monies returned.

Please mail the signed claim form to: **California State Library  
Fiscal/Local Assistance  
P.O. Box 942837  
Sacramento, CA 94237-0001**

The following specific issues or observations are being made about your Final Report:

*We encourage your literacy staff to attend network meetings regularly. We will soon begin offering literacy staff the opportunity to participate in some network meetings online. Please let us know what else we can do to help your staff participate and benefit from the training and networking that takes place at the meetings.*

In February, you'll be asked to revise your literacy budget for the 2019-2020 fiscal year utilizing the actual total allotment from the State Library shown in this award letter. The budget that you submitted with your application earlier this year was based on projections. Your revised budget should the updated information included in this letter.

You'll be asked to report electronically after the close of the fiscal year. Library literacy services staff will provide more details on this process.

**PLEASE REMEMBER THAT**

**ALL STATE FUNDS MUST BE EXPENDED OR ENCUMBERED BY JUNE 30, 2020**

**OR RETURNED TO THE STATE.**

If you need a copy of your most recent final report and/or application, or have any questions, please contact Natalie Cole at [natalie.cole@library.ca.gov](mailto:natalie.cole@library.ca.gov).

Thanks again for your commitment to literacy. It's one of the most transformative and successful things libraries do.

Respectfully yours,

Greg Lucas  
California State Librarian

*Happy Holidays - Wish you all the best in 2020!*

cc: Shanti Bhaskaran, Literacy Coordinator (via email: [sbhaskaran@santaclaraca.gov](mailto:sbhaskaran@santaclaraca.gov))

Enc.: Claim Form  
Certification Form



PLEASE COMPLETE AND RETURN THIS PAGE

**Claim Form****State of California  
California Library Literacy and English Acquisition Services (CLLS)****California Education Code; Section 18880-18883  
Budget Citation Chapter 23 - Budget Item 6120-213-0001**

<b>Fiscal Year: 2019-2020</b>	
Reporting Structure: 61202000	COA: 5432000; Approp. Ref: 213
Purchasing Authority Number: CSL-6120	Category: 84121600 Program #: 5312

**FOR PAYMENT OF CALIFORNIA LIBRARY LITERACY SERVICES GRANT**Amount Claimed – Final Installment: **\$30,072****SANTA CLARA CITY LIBRARY**

claims the indicated allowance for the purposes of carrying out the functions stated in its CLLS application and in Sections 18880-18883 of the California Education Code.

*Warrant to be issued for payment to the library to be addressed to:***\*Santa Clara Public Library, 2635 Homestead Rd, Santa Clara, CA 95051-5322**

(Authorized agency to receive, disburse and account for CLLS funds)

I hereby certify under penalty of perjury: that the library named above shall use their allowance solely for the purposes indicated in their CLLS application and in Sections 18880-18883 of the California Education Code.

  
Official Representative or Fiscal Agent (Signature Required)Hilary Keith, City Librarian  
Title

MAIL ONE ORIGINAL SIGNATURE TO:  
**California State Library  
Fiscal Office – CLLS  
P. O. Box 942837  
Sacramento, CA 94237-0001**

**State Library Local Assistance Office Use Only**

STATE OF CALIFORNIA, State Library Fiscal Office

By \_\_\_\_\_  
State Library Representative*Approval by State:*

CLLS \$ \_\_\_\_\_

Date: \_\_\_\_\_

**PLEASE COMPLETE AND RETURN THIS PAGE****CERTIFICATION**

I hereby certify under penalty of perjury: that I am the duly authorized representative of the claimant herein; that the claim is in all respects true, correct and in accordance with law and the terms of the agreement; and that payment has not previously been received for the amount claimed herein.

The claims the indicated allowance for the purposes of carrying out the functions stated in its CLLS application and in Sections 18880-18883 of the California Education Code.

**SIGNED****DATE**1/9/20

---

Signature - Authorized representativeKenn Lee, Director of Finance

---

Typed/Printed Name and Title of Authorized Representativeklee@santacclaraca.gov

---

Email address of authorized representative

-----

MAIL ONE ORIGINAL SIGNATURE TO:

**California State Library  
Fiscal Office – CLLS  
P. O. Box 942837  
Sacramento, CA 94237-0001**