



January 10, 2019

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

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 2018-2019 fiscal year.

This **final, second payment** of your total allocation for the fiscal year that began July, 2018 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, 2018.

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 re-cap of your total California Library Literacy Services funding for the current program year:

Baseline Adult Literacy Services:	\$18,000 (amount previously claimed)
Final Payment (Per Capita & Match):	\$30,072 (amount to be claimed now)
GRAND TOTAL FOR 2018/19:	\$48,072

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

We'll initiate the payment process upon receipt of your signed claim form, which is attached. 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.

The following specific issues or observations are being made about your final report:

None

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

The attached forms require your signature and serve two purposes:

1. Requests to claim the funds and have a check sent to you
2. Certifies that your library will use the funds for the purpose intended; and

In January, you'll be asked to revise your literacy budget for the 2018-2019 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 reflect updated information and more accurate figures than you had at the time of application.

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. If you need a copy of your most recent final report and/or application, please contact Andrea Freeland at andrea.freeland@library.ca.gov.

PLEASE REMEMBER THAT

**ALL STATE FUNDS MUST BE EXPENDED OR ENCUMBERED BY JUNE 30, 2019
OR RETURNED TO THE STATE.**

Should you have additional questions regarding the new funding and/or reporting process, please contact:

Natalie Cole (916) 651-0985 or natalie.cole@library.ca.gov
Andrea Freeland (916) 651-3191 or andrea.freeland@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

cc: Shanti Bhaskaran, Literacy Coordinator (via email: sbhaskaran@santaclaraca.gov)
Hilary Keith, City Librarian (via email: hkeith@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 29 - Budget Item 6120-213-0001**

Fiscal Year: 2018-2019		
Reporting Structure: 61202000	COA: 5432000;	Approp. Ref: 213
Purchasing Authority Number: CSL-6120	Category: 84121600	Program #: 5312

FOR PAYMENT OF CALIFORNIA LIBRARY LITERACY SERVICES GRANTAmount 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)_____
TitleMAIL 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.

Santa Clara City Library

SIGNED

DATE

Signature - Authorized representative

Typed/Printed Name and Title of Authorized Representative

Email address of authorized representative

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