



REQUEST FOR SPECIAL LSTA ADVANCE - INSTRUCTIONS
LSTA – PL 108-81, As Amended
South Carolina State Library
Submit (1) paper copy with original signatures to the LSTA Coordinator

NOTE: Because LSTA is a reimbursable program all LSTA fund advances require prior approval by the Institute of Museum and Library Services (IMLS) and the SC State Library. Consideration is extended to subgrantees administering projects with the potential for significant statewide impact. Final approval is at the discretion of the State Librarian. (To submit a personal services advance funds request, use the "Personal Services Advance Funds Requisition Form.") **Contact the LSTA Coordinator before submitting requests.**

Sub-Grant Project Title. Indicate the title you have given your project.

- I. **Sub-grantee Name:** This is the name of the entity receiving the grant as indicated on the award contract. **Date:** This is the date of the award indicated on your award contract/notification.
- II. **Project Administrator, Phone, E-mail:** This is the staff member that is responsible for managing the project on a day-to-day basis.
- III. **Fiscal Officer, Phone, E-mail:** This is the staff member responsible for financial records of the project and for serving as the contact person on financial matters.
- IV. **Total Award:** Indicate the budget (LSTA funds only) as approved by the SCSL.
 - **Funds Expended to Date:** Indicate the total amount (LSTA funds only) expended as of the date of your Request for Advance Funds.
 - **Funds Received to Date:** Indicate the total amount of LSTA funds received.
 - **Advance Requested:** Include the total of LSTA funds needed in advance of expenditure. **Requests for advance payment should be limited to immediate cash needs and are not to exceed anticipated expenditures for a thirty (30) day period.** Advance payment requests covering a 90-day period may not exceed \$25,000. **Complete a form for each (30) day period requested.** Indicate the dates for the (30) day period in the section provided.
 - **LSTA Award Balance:** Indicate the total amount of LSTA funds remaining. This should be Total LSTA Award (minus) all funds expended and received to date and advance funds requested.

SIGNATURE: *The library director, the project administrator or the fiscal officer must sign.*