

The University of the State of New York
THE STATE EDUCATION DEPARTMENT
Grants Finance, Rm. 510W EB
Albany, NY 12234

REQUEST FOR FUNDS FOR A
FEDERAL OR STATE PROJECT
FS-25 (9/09)

	Project #		Contract #	
	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	
Agency Code:	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	
Funding Source:	<hr/>			
Agency Name:	<hr/>			
Mailing Address:	<hr/>			
	Street			
	<hr/>			
	City	State	Zip Code	
Contact Person:	<hr/>		Telephone:	<hr/>
E-Mail Address	<hr/>			
			<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>
			MONTH	YEAR

CHIEF ADMINISTRATOR'S CERTIFICATION	
<i>I hereby certify that all information reported herein is true and accurate.</i>	
Date: <hr/>	Signature: <hr/>

1. Amount of Approved Budget (Include approved amendments)	\$ <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div>
2. Project Payments Received to Date	\$ <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div>
3. Project Cash Expenditures to Date	\$ <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div>
4. Cash Expenditures Anticipated During Next Month	\$ <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div>
5. Additional Funds Requested (Entries 3 plus 4 minus 2)	\$ <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div>

FOR DEPARTMENT USE ONLY		
	Fiscal Year	Payment Split
Voucher #	<hr/>	\$ <hr/>
	<hr/>	\$ <hr/>
	<hr/>	\$ <hr/>
Finance:	<div style="border: 1px solid black; width: 80px; height: 20px; display: inline-block;"></div>	\$ <hr/>
	Log	\$ <hr/>
	<div style="border: 1px solid black; width: 80px; height: 20px; display: inline-block;"></div>	
	MIR	
	<hr/>	\$ <hr/>

Instructions

Use this form to request funds from a grant approved by the State Education Department. Before submitting a request to Grants Finance, local agency staff must have a clear understanding of the policies and procedures regarding payments for federal and State grants. The Department will consider the Chief Administrator's signature on the form to be confirmation of the agency's knowledge of and agreement to meet the requirements. The requirements that must be met in order to receive funds using form FS-25 are addressed in Grants Finance's Fiscal Guidelines for Federal and State Grants at <http://www.oms.nysed.gov/cafe/guidance/>.

Please review your agency's budget, amendment, expenditure and payment records prior to completing the FS-25.

Line 1 - Amount of Approved Budget: Enter the total amount of the approved budget plus any approved budget amendments.

Line 2 – Project Payments Received to Date: Enter the total of any payments received by the agency for this particular grant.

Line 3 – Project Cash Expenditures to Date: Enter the total amount of actual expenditures made under this grant.

Line 4 – Cash Expenditures Anticipated During the Next Month: Request only what is needed to support grant activities during the next month, minimizing the time between receipt of the funds and disbursement. Enter zero if the grant program is reimbursement only or if your agency is receiving payments on a reimbursement-only basis.

Line 5 – Additional Funds Requested: Add lines 3 and 4, then subtract 2. Enter the result in line 5. If line 5 is zero or less, do not submit a form FS-25.

Please use whole dollar amounts.

Send one copy with original signature directly to Grants Finance for each grant. For Special Legislative Projects, send one original and two copies to Grants Finance.