



## REQUEST FOR ADVANCE FUNDS

If you wish to apply for Free Summer Meals Program (FSMP) advance funds, you must complete this form.

Name of Sponsor: \_\_\_\_\_

Fiscal Year: \_\_\_\_\_

List the program name and year of any USDA Child Nutrition Program that your organization has participated in: \_\_\_\_\_

Complete the section below indicating the amount of funds requested. Funds may not exceed:

- a. **Renewing Sponsors:** the total operating cost paid for same calendar month in preceding year;
- b. **Vended Sponsors:** 50% of the determined amount needed for meals for same month
- c. **Self-prep Sponsor:** 65% of the determined amount needed for meals for same month

Amount of advance requested: \_\_\_\_\_

Month advance requested: \_\_\_\_\_

The receipt of the FSMP advance funds is contingent upon the conditions and limitations outlined below:

1. Sponsors must request Advance Payment for operating costs from the State Agency at least 30 days before the payment dates of June 1, July 1, and August 15. If sponsors have participated in last year's program, the advance payments for operating costs will usually be based on the reimbursement earned during the same month of the previous year. The State Agency may also estimate Advance Payments as a percentage of the anticipated costs.
2. Advance funds will be recovered from future current year claims for reimbursement.
3. A Sponsor will not receive Advance Payment for any month it will not be operating for less than 10 days.

I certify that I have read and understand the conditions cited above with regard to the receipt of FSMP advance funds. I also certify and understand that the information submitted on this form is true and correct and that I am aware that deliberate misrepresentation or withholding of information may result in prosecution under applicable State and Federal statutes.

Signature Authorized Representative: \_\_\_\_\_

Print Name and Title: \_\_\_\_\_

Date \_\_\_\_\_