Summary Request for Voluntary and Temporary Transfer (VTT) of the California Department of Education (CDE) California State Preschool Program (CSPP) Contract Funds

Current Date:

Fiscal Year:

Monitoring Consultant, Early Education Division (EED):

Fiscal Analyst, Early Education and Nutrition Fiscal Services (EENFS):

Dear CDE Representatives,

I am writing on behalf of the VTT requests between [Enter Releasing Contractor Name] and [Enter Accepting Contractor Name] to summarize their agreement to participate in a VTT of funds between their CDE contracts within [Enter County Name] county.

Releasing Contractor Name:	**Accepting Contractor Name:**
[Enter Releasing Contractor Name]	[Enter Accepting Contractor Name]
Contract Number:	Contract Number:
Current Maximum Reimbursable Amount (MRA):	Current MRA:
Amount Releasing:	Amount Accepting:
VTT Adjusted Contract MRA:	VTT Adjusted Contract MRA:

Both agencies understand:

- The transfer of contract funds is voluntary and temporary.
- The subsequent fiscal year contracts will revert to the original MRA amounts, with any applicable adjustments applied, subject to continued funding appropriated in the annual Budget Act (if applicable).
- The CDE may require additional documentation to make a final determination regarding the VTT request.
- The contract reimbursement rate in place for each agency will not change during the fiscal year.
- All contracts may be subject to EENFS' annual contract review process.
- The transferred funds may never be placed in a reserve account and shall not be retained as deferred revenue to be used in future fiscal years.
- An Exceptional Needs/Severely Disabled Service Level Exemption Credit shall not be derived from an unearned transfer of funds. Funds must be used to serve additional child days of enrollment and shall not be retained as deferred revenue.
- All transferred funds must be fully expended by June 30 of the fiscal year.

If you have questions or need additional information about the submitted request, please contact:

Local Planning Council (LPC) Designee:

Phone Number: and Email:

Sincerely,

Signature: _____
A wet signature or electronic signature is required.