



Library: \_\_\_\_\_

Code: \_\_\_\_\_

Municipality: \_\_\_\_\_

Type of Aid: **Tax-based** **Endowment-based**

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

The library named above requests to reallocate its state grant-in-aid as follows:

Original Allocations		Requested Allocations	
Salaries		Salaries	
OSL Membership Fees		OSL Membership Fees	
Physical Materials		Physical Materials	
Electronic Materials		Electronic Materials	
Programming		Programming	
Other		Other	
Describe Other		Describe Other	
<b>Total</b>		<b>Total</b>	

**Explanation:**

\_\_\_\_\_  
**Library Director (name)**

\_\_\_\_\_  
**Library Director signature**

\_\_\_\_\_  
**Date**

**This reallocation application is hereby approved by:**

\_\_\_\_\_  
**Chief of Library Services**  
**RI Office of Library & Information Services**

\_\_\_\_\_  
**Date**