



## FLORIDA DEPARTMENT *of* STATE

**RON DESANTIS**  
Governor

**CORD BYRD**  
Secretary of State

May 21, 2025

Cindy Loftis-Culp, Library Director  
Hernando County Public Library System  
238 Howell Avenue  
Brooksville, Florida 34601

Dear Ms. Loftis-Culp:

Subject: Grant Payment – State Aid  
Project: 25-ST-19 (25.1.sa.000.103)  
Payment Number: 1  
Payment Amount: \$492,546.00

In accordance with the grant agreement between the Florida Department of State, Division of Library and Information Services and your organization, enclosed is a payment for the project noted above.

Please include the project identification number in any future correspondence with our office regarding this project. If you have questions or need assistance, please contact me at Thomas.Pena@dos.fl.gov or 850.245.6620.

Sincerely,

Tom Peña  
Grant Programs Supervisor

TP/nn

Enclosure

## FLORIDA DEPARTMENT OF STATE

Secretary of State

## DIVISION OF LIBRARY AND INFORMATION SERVICES

## INVOICE

19

**Organization:** Hernando County Public Library System      **Grant Number:** 25.lsa.000.103  
**FEIN:** F591155275005      **Payment Address:** 238 Howell Avenue Brooksville, FL 34601  
**Title:** State Aid to Libraries Grant      **Contact:** Thomas Peña

Type of Payment	Payment #	Invoice #	Invoice Period Begin Date	Invoice Period End Date
Fixed Price	1	1251103	10/1/2024	5/9/2025

Total Grant Amount: \$492,546.00  
Prior Payment: \$0.00  
Balance to Date: \$492,546.00  
**THIS PAYMENT:** \$492,546.00  
Balance Remaining: \$0.00

**Deliverable(s) provided (as stated in grant agreement):**

- The Grantee will: 1) Have expended funds to provide free library service during the period October 1, 2022 – September 30, 2023. 2) Provided an Expenditure Report and certification of Local Operating Expenditures for the period October 1, 2022 - September 30, 2023 only. 3) Provided documentation showing that at least one library, branch library or member library is open 40 hours or more each week (excluding holidays or emergencies; between Sunday through Saturday, on a schedule determined by the library system) during the length of the agreement. 4) Provided the Certification of Credentials for the Single Administrative Head. 5) Provided the Certification of Hours, Free Library Service and Access to Materials.

**Documentation Provided**

- [25-ST-19 Hernando Certification of Credentials - SLAH](#)
- [25-ST-19 Hernando Certification of Hours](#)
- [25-ST-19 Hernando Certification of Local Operating Expenditures](#)
- [25-ST-19 Hernando Expenditure Report](#)
- [25-ST-19 Hernando Schedule of Library Hours](#)
- [Contract Summary Form](#)

Thomas Peña

5/9/2025

Electronic Signature of Grantee  
(Project Manager or Authorized Official)

Date Of Request  
Electronically Submitted to DOSGrants.com

*Information to be completed by the Department of State:*

Deliverables and minimum performance levels have been satisfactorily completed by the recipient:



Thomas Peña

5/13/2025

Electronic Signature for DOS Program Manager Approval

Date Invoice Approved by Grants Staff

Date Invoice Paid by Finance

Fund ID	Category	Encumbrance	Org	EO	OBJECT	GAA Line #
000132	050792	E5L103	45-40-01-30-000	1D	751000	

Vendor ID	Contract
	5L103