INSTRUCTIONS FOR COMPLETING
CARES ACT - ESSER FEDERAL FUNDS REQUEST (ES-2 ER FORM)

1. Submit one original completed form with the signature of Superintendent no later than the tenth of the month to the following address:

   Alabama State Department of Education
   Division of Administrative and Financial Services
   LEA Accounting
   Room 5141 Gordon Persons Building
   P O Box 302101
   Montgomery, AL  36130-2101

2. If you have no request to make for a particular month, you do not have to submit the form.

3. In order for all requests to have a uniform appearance and to make sure that calculations are correct, do not change the format when preparing a request. Enter the required amounts in columns 1, 2, and 3. Be careful not to delete or write over cells in columns 4 and 6 because they have been formulated to make automatic calculations. Column 5 is only to be used if needed. (See below regarding cash on hand)

4. With submission of this form, certification is given that the request is in compliance with the Cash Management Improvement Act (CMIA).

5. Per the CMIA, estimates of anticipated disbursements should be carefully made in order to avoid excessive cash balances. Cash should be requested only for disbursements paid during the prior month for which receipts were insufficient and/or estimated disbursements to be paid for immediate cash needs.

6. Excess cash due to an inaccurate estimate of disbursements should be returned to the SDE immediately at the address above.