

STATE OF SOUTH CAROLINA
D38 FEDERAL GRANT MAINTENANCE FORM

Requesting Agency Name: 1 _____

Telephone Number: 1 _____

Requesting Action: 2
☐ Add
☐ Delete
☐ Change

3 PROJECT LEVEL			4 AGY NO.	5 FEDERAL GRANT TITLE	6 CFDA NO.	7 F S C	8 SUB AGY NO.	9 XREF LEVEL			10 GAAP CODE	C A P P R O J	12 START DATE		13 END DATE		14 FEDERAL AWARD AMOUNT
PROJECT NUMBER	F F F Y	X R E F						XREF PROJ.	F F F Y	X R E F			MO.	YR.	MO.	YR.	
												11					

Prepared By: 15 _____
Signature

Date _____

Prepared Agency: _____

Governor's Office: _____

CG's Office: _____

Approved By: 16 _____
Initials

Date _____

Financial Reporting: _____

Accg. Operations: _____

Data Processing: _____

State Treasurer: _____

Comments: 17 _____
