

MONTANA CDBG ED PROGRAM
SAMPLE REQUEST FOR PAYMENT & STATUS OF FUNDS REPORT

SECTION I -- REQUEST FOR PAYMENT (RECIPIENT INFORMATION)					
DOC CONTRACT NUMBER MT-CDBG-ED00-01		DRAWDOWN NUMBER 1		TOTAL AMOUNT REQUESTED \$127,200.00	
NAME AND ADDRESS OF GRANTEE CITY OF SUNRISE 1234 5TH AVE SUNRISE, MT 59000			MAKE DEPOSIT PAYABLE TO: CITY OF SUNRISE ACCOUNT NUMBER: XX-XXXX-XXXX		
SECTION II -- STATUS OF FUNDS (FINANCIAL INFORMATION)					
A Line #	B Budget Line Item	C Amount Budgeted	D Expended Prior To This Draw	E Balance Remaining	F Amount Requested
ADMINISTRATION BUDGET		<small>* INDICATES AMENDMENTS</small>			
1.	Personnel Costs (City or County)	\$ 1,000.00	\$ -	\$ 1,000.00	\$ 500.00
2.	Professional Services (LDO)	200.00	-	200.00	-
3.	Legal Costs	80.00	-	80.00	-
4.	Audit Fees	500.00	-	500.00	500.00
5.	Travel & Training	19,900.00	-	19,900.00	1,200.00
6.	Supplies				
7.	Telephone				
8.	Printing/Dup/Postage				
9.					
10.					
11.	TOTAL ADMINISTRATION BUDGET	\$ 21,680.00	\$ -	\$ 21,680.00	\$ 2,200.00
12.	Percent	% of Total Grant 8.0%	% of Column C 0.0%		
BUSINESS LOANS					
13.	Land Acquisition	75,000.00	-	75,000.00	25,000.00
14.	Machinery/Equipment	150,000.00	-	150,000.00	100,000.00
15.	Working Capital	25,000.00	-	25,000.00	-
16.	Construction/Renovation				
17.					
18.					
19.					
20.	TOTAL ACTIVITY BUDGET	\$ 250,000.00	\$ -	\$ 250,000.00	\$ 125,000.00
21.	Percent	% of Total Grant 92.0%	% of Column C 0.0%		
22.	TOTAL GRANT BUDGET	\$ 271,680.00	\$ -	\$ 271,680.00	\$ 127,200.00
23.	CDBG Cash on Hand		\$ -		
24.	Amount of Requests Submitted and NOT Received		\$ -		
25.	Total Previously Drawn from State		\$ -	TOTAL AMOUNT REQUESTED	\$ 127,200.00
REMARKS					
SECTION III -- LOCAL CERTIFICATION					
DATE December 12, 2000		SIGNATURE Susie J. Smith		TITLE Mayor, City of Sunrise	
DATE <i>12/12/00</i>		SIGNATURE <i>Jon F. Doe</i>		TITLE Finance Manager, City of Sunrise	
SECTION IV -- DOC CERTIFICATION					
Expenditures are reasonable & appropriate _____			Approved by: Title: Date:		
Financial numbers & signatures are correct _____					
Consistent with preceding draw & SBAS _____					
Administration does not exceed allowable amount (8%) _____					
Cash on hand does not exceed \$5,000 _____					

MONTANA CDBG ED PROGRAM
SAMPLE REQUEST FOR PAYMENT & STATUS OF FUNDS REPORT

SECTION I -- REQUEST FOR PAYMENT (RECIPIENT INFORMATION)					
DOC CONTRACT NUMBER MT-CDBG-ED00-01		DRAWDOWN NUMBER 2		TOTAL AMOUNT REQUESTED \$127,690.00	
NAME AND ADDRESS OF GRANTEE CITY OF SUNRISE 1234 5TH AVE SUNRISE, MT 59000			MAKE DEPOSIT PAYABLE TO: CITY OF SUNRISE ACCOUNT NUMBER: XX-XXXX-XXXX		
SECTION II -- STATUS OF FUNDS (FINANCIAL INFORMATION)					
A Line #	B Budget Line Item	C Amount Budgeted	D Expended Prior To This Draw	E Balance Remaining	F Amount Requested
ADMINISTRATION BUDGET		* INDICATES AMENDMENTS			
1.	Personnel Costs (City or County)	\$ 1,000.00	\$ 500.00	\$ 500.00	\$ 100.00
2.	Professional Services (LDO)	200.00	-	200.00	50.00
3.	Legal Costs	80.00	-	80.00	40.00
4.	Audit Fees	500.00	500.00	-	-
5.	Travel & Training	19,900.00	1,200.00	18,700.00	2,500.00
6.	Supplies				
7.	Telephone				
8.	Printing/Dup/Postage				
9.					
10.					
11.	TOTAL ADMINISTRATION BUDGET	\$ 21,680.00	\$ 2,200.00	\$ 19,480.00	\$ 2,690.00
12.	Percent	% of Total Grant 8.0%	% of Column C 10.1%		
BUSINESS LOANS					
13.	Land Acquisition	75,000.00	25,000.00	50,000.00	50,000.00
14.	Machinery/Equipment	150,000.00	100,000.00	50,000.00	50,000.00
15.	Working Capital	25,000.00	-	25,000.00	25,000.00
16.	Construction/Renovation				
17.					
18.					
19.					
20.	TOTAL ACTIVITY BUDGET	\$ 250,000.00	\$ 125,000.00	\$ 125,000.00	\$ 125,000.00
21.	Percent	% of Total Grant 92.0%	% of Column C 50.0%		
22.	TOTAL GRANT BUDGET	\$ 271,680.00	\$ 127,200.00	\$ 144,480.00	\$ 127,690.00
23.	CDBG Cash on Hand		\$ -		
24.	Amount of Requests Submitted and NOT Received		\$ -		
25.	Total Previously Drawn from State		\$ 127,200.00	TOTAL AMOUNT REQUESTED	\$ 127,690.00
REMARKS					
SECTION III -- LOCAL CERTIFICATION					
DATE March 12, 2001		SIGNATURE Susie J. Smith		TITLE Mayor, City of Sunrise	
DATE <i>03/12/01</i>		SIGNATURE <i>Jon F. Doe</i>		TITLE Finance Manager, City of Sunrise	
SECTION IV -- DOC CERTIFICATION					
Expenditures are reasonable & appropriate _____			Approved by: Title: Date:		
Financial numbers & signatures are correct _____					
Consistent with preceding draw & SBAS _____					
Administration does not exceed allowable amount (8%) _____					
Cash on hand does not exceed \$5,000 _____					

**MONTANA CDBG-ED PROGRAM
REQUEST FOR PAYMENT & STATUS OF FUNDS REPORT**

SECTION I -- REQUEST FOR PAYMENT (RECIPIENT INFORMATION)					
MDOC CONTRACT NUMBER <div style="text-align: center;">1.</div>		DRAWDOWN NUMBER <div style="text-align: center;">2.</div>		TOTAL AMOUNT REQUESTED <div style="text-align: center;">3.</div>	
NAME AND ADDRESS OF GRANTEE <div style="text-align: center;">4.</div>			MAKE DEPOSIT PAYABLE TO: <div style="text-align: center;">5.</div>		
			ACCOUNT NUMBER: <div style="text-align: center;">6.</div>		
SECTION II -- STATUS OF FUNDS (FINANCIAL INFORMATION)					
A Line #	B Budget Line Item	C Amount Budgeted	D Expended Prior To This Draw	E Balance Remaining	F Amount Requested
ADMINISTRATION BUDGET		<small>* INDICATES AMENDMENTS</small>			
1.		\$	\$	\$	\$
2.	<div style="text-align: center;">7.</div>	<div style="text-align: center;">8.</div>	<div style="text-align: center;">10.</div>	<div style="text-align: center;">12.</div>	<div style="text-align: center;">13.</div>
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11. TOTAL ADMINISTRATION BUDGET		\$	\$	\$	\$
12. Percent		% of Total Grant <div style="text-align: center;">9.a</div> %	% of Column C <div style="text-align: center;">11.a</div> %		
ACTIVITY BUDGET					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20. TOTAL ACTIVITY BUDGET		\$	\$	\$	\$
21. Percent		% of Total Grant <div style="text-align: center;">9.b</div> %	% of Column C <div style="text-align: center;">11.b</div> %		
22. TOTAL GRANT BUDGET		\$	\$	\$	\$
23. CDBG Cash on Hand			\$ <div style="text-align: center;">14.a</div> -		
24. Amount of Requests Submitted and NOT Received			\$ <div style="text-align: center;">14.b</div> -		
25. Total Previously Drawn from State			\$ <div style="text-align: center;">14.c</div>	TOTAL AMOUNT REQUESTED	\$
REMARKS					
<div style="text-align: center;">15.</div>					
SECTION III -- LOCAL CERTIFICATION					
DATE		SIGNATURE <div style="text-align: center;">16.</div>		TITLE	
DATE		SIGNATURE		TITLE	
SECTION IV -- DOC CERTIFICATION					
Expenditures are reasonable & appropriate _____			<div style="text-align: center;">17.</div> Approved by: Title: Date:		
Financial numbers & signatures are correct _____					
Consistent with preceding draw & SBAS _____					
Administration does not exceed allowable amount _____					
Cash on hand does not exceed \$5,000 _____					