

**Waterway Development Program Grants
Payment Request**

Instructions for Submission of Request for Payment:

1. Please submit a copy of this form each time a request for reimbursement is submitted.
2. Please include copies of all invoices, receipts and cancelled checks that serve as backup for the request. Additional documentation may be included such as fee/rate scheduled, time logs and participant information, procurement documentation (for assets) and photos.
3. Sign the Subgrantee signature line.
4. Requests may be submitted, electronically via e-mail, or by US Mail to:

Kristin Ruger, Grants Analyst
Sarasota County Office of Financial Management
301 N. Cattlemen Rd., Suite 200
Sarasota, FL 34232

E-mail: kruger@scgov.net

1. Recipient Identification:

Organization Receiving Grant: _____

Organization Address: _____

Contact Person: _____

Title: _____

Telephone Number: _____

E-Mail Address: _____

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2. **Project Title and "S" Number:** _____

3. **Purchase Order Number:** PO _____

4. Project Expenditures Summary:	<u>Total to Date</u>	<u>This Request</u>
Pre-Construction Expenses	\$ _____	\$ _____
Contractual Services	\$ _____	\$ _____
Materials and Supplies	\$ _____	\$ _____
Other Eligible Expenses	\$ _____	\$ _____
Total	\$ _____	\$ _____

5. **Funds Requested** \$ _____

6. **Amount Allocated by** \$ _____

Funds Previously Disbursed \$ _____

Balance Available \$ _____

Funds Requested this Payment \$ _____

Balance Remaining \$ _____

7. **Certification for Reimbursement:** I certify that the above expenses were incurred for the approved project and that the progress of the project is consistent with the amount requested. I also certify that matching funds as further identified in the agreement meet the eligibility requirements under 66A-2, F.A.C., and the remaining conditions set forth in Waterway Development Program, as further codified in Chapter 66A-2, F.A.C., and Section 374.976, Fla. Stat.

8. **Subgrantee Signature:** _____

Date: _____