



# REQUEST FOR PAYMENT FORM A203

Grant Recipient: Tom Green County

Contract No.: 7214047 Request No: 1 Region: CVCOG

**Note: All shaded field headers are interactive buttons that contain helpful information to complete this form.**

Contract Period: From: Aug 11, 2014 To: Aug 10, 2016 Period Covered by this Report: From: Aug 5, 2014 To: Oct 17, 2014

Activity Number A	Budget B	This Request C	Total Drawn D	Balance (B-C-D)	% of Activity Budget Drawn
03J - Water Improvements-Constructor	\$ 273,500.00	\$ 0.00	\$ 0.00	\$ 273,500.00	0%
03J - Water Improvements-Engineering	\$ 41,500.00	\$ 0.00	\$ 0.00	\$ 41,500.00	0%
21J - General Administration	\$ 35,000.00	\$ 7,000.00	\$ 0.00	\$ 28,000.00	20%
<b>Total Grant Funds:</b>	<b>\$ 350,000.00</b>	<b>\$ 7,000.00</b>	<b>\$ 0.00</b>	<b>\$ 343,000.00</b>	
<b>Matching Funds:</b>	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	

**Note: Submit supporting documentation for all costs in Column C, including costs paid through matching funds.**

<b>Total Grant Funds Requested To Date:</b> \$ 7,000.00	<b>Total Match Funds Expended To Date:</b> \$ 0.00	0 percent match funds to grant funds expended
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**REMARKS:** (if construction funds are drawn and \$0 match is reported, provide explanation)

**ALL EXPENDITURES RELATED TO THIS CONTRACT MUST BE CONSISTENT WITH THE UNIFORM GRANT AND CONTRACT MANAGEMENT ACT, CHAPTER 783 OF THE TEXAS GOVERNMENT CODE, OFFICE OF MANAGEMENT AND BUDGET CIRCULAR 102, AND CODE OF FEDERAL REGULATIONS TITLE 24 PART 85.**

**CERTIFICATION:** By my signature below, I certify to the best of my knowledge and belief that:

- \* The data above is correct, payment is due, and the reported costs have not been previously drawn; and
- \* All activities requested for reimbursement or reported as matching funds are consistent with the TxCDBG contract, Exhibit A Performance Statement, and all disbursements were made in accordance with the terms of the contract.

Stephen C. Floyd	County Judge		10-28-14
<i>Name of 1st Authorized Certifying Official</i>	<i>Title</i>	<i>Signature of Authorized Certifying Official</i>	<i>Date</i>
Elizabeth McGill	County Clerk		10-28-14
<i>Name of 2nd Authorized Certifying Official</i>	<i>Title</i>	<i>Signature of Authorized Certifying Official</i>	<i>Date</i>

**Form must be signed and dated by authorized signatories.**

Revised form required as of October 21, 2013.

**TDA Program File Use Only**

Specialist Approval: \_\_\_\_\_ Date: \_\_\_\_\_



# REQUEST FOR PAYMENT FORM A203

Grant Recipient: Tom Green County

Contract No.: 7214037 Request No: 1 Region: CVCOG

**Note: All shaded field headers are interactive buttons that contain helpful information to complete this form.**

Contract Period: From: Aug 11, 2014 To: Aug 10, 2016 Period Covered by this Report: From: Aug 5, 2014 To: Oct 17, 2014

Activity Number A	Budget B	This Request C	Total Drawn D	Balance (B-C-D)	% of Activity Budget Drawn
03J - Water Improvements-Constructor	\$ 276,000.00	\$ 0.00	\$ 0.00	\$ 276,000.00	0%
03J - Water Improvements-Engineering	\$ 39,000.00	\$ 0.00	\$ 0.00	\$ 39,000.00	0%
21J - General Administration	\$ 35,000.00	\$ 7,000.00	\$ 0.00	\$ 28,000.00	20%
<b>Total Grant Funds:</b>	<b>\$ 350,000.00</b>	<b>\$ 7,000.00</b>	<b>\$ 0.00</b>	<b>\$ 343,000.00</b>	
<b>Matching Funds:</b>	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	

**Note: Submit supporting documentation for all costs in Column C, including costs paid through matching funds.**

<b>Total Grant Funds Requested To Date:</b> \$ 7,000.00	<b>Total Match Funds Expended To Date:</b> \$ 0.00	percent match funds to grant funds expended 0
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**REMARKS:** (if construction funds are drawn and \$0 match is reported, provide explanation)

**ALL EXPENDITURES RELATED TO THIS CONTRACT MUST BE CONSISTENT WITH THE UNIFORM GRANT AND CONTRACT MANAGEMENT ACT, CHAPTER 783 OF THE TEXAS GOVERNMENT CODE, OFFICE OF MANAGEMENT AND BUDGET CIRCULAR 102, AND CODE OF FEDERAL REGULATIONS TITLE 24 PART 85.**

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