

Kentucky Department for Local Government
Community Development Block Grant
Request for Payment

Name	Project Administrator		Date
Address			Grant #
	DLG Project Advisor		Request #

PART I - Status of Funds

1. Grant funds received to date		IMPORTANT
2. Add program income received since last draw		
3. Subtotal		
4. Less CDBG funds disbursed to date		
5. Cash on Hand		

1) Round all figures to the nearest dollar

2) Complete Part II for all approved activities even if funds are not requested.

PART II - Cash Requirements

	Activity Code														
	Description														TOTAL
	Current Budget														
1. CDBG funds required to date															
2. CDBG funds previously requested															
3. CDBG funds requested															
	IDIS Activity Number														

PART III - Project Status

Briefly describe the project's status

Source of other funds															
Total other funds expended															TOTAL

I certify that this request for federal funds has been prepared in accordance with the terms and conditions of the Grant Agreement, and that the amount requested is for eligible expenditures as per the federal regulations cited in the Statement of Assurances of the grant application.

I also certify that all the data reported above is correct and that the amount of the request for federal funds is not in excess of current needs.

Authorized Signature	Title	Date
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For DLG Use Only	
Authorized Signature	Date

**Kentucky Department for Local Government
HUD Disaster Recovery Initiative
Request for Payment**

Name	Date
Address	October 17, 2012
	Grant Number #
	Request Number #

Draw Request

	Description	Public Assistance	Hazard Mitigation*	Special Projects							
	Current Budget										TOTAL
1.	CDBG funds required to date										
2.	CDBG funds previously requested										
3.	CDBG funds requested										

* Housing Buyout

Project Status

Briefly describe the project's status

*I certify that this request for federal funds has been prepared in accordance with the terms and conditions of the Grant Agreement, and that the amount requested is for eligible expenditures as per the federal regulations cited in the Statement of Assurances of the grant application.
I also certify that all the data reported above is correct and that the amount of the request for federal funds is not in excess of current needs.*

Authorized Signature	Title	Date
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Authorized Signature	Title	Date