

Shaded area for DNR use only

DNR Accounting Dept., Return Copy To:

Kathleen Moench

Doc #: _____ Date: _____

CV: _____

Grant Recipient: _____

Address: _____

City, State Zip: _____

State ID #: _____

FUND/DEPT/ORG/SUBORG/\$: _____

Attachment A

DEPARTMENT OF NATURAL RESOURCES

REAP EDUCATION GRANT - FINAL PROJECT BILLING

Project billings must be accompanied by all required documentation (invoices, canceled checks, deeds, etc.) covering expenditures included in the billing. If you have questions, please contact the Budget & Finance Bureau at 515-725-8213.

Grant Recipient: _____ Grant #: _____

Project Title: _____ Final Payment: Yes No

Use the table below to list your budget items and the expenditures for each item. You should follow the budget items provided with your grant proposal as closely as possible.

Grant \$ Budget Category	Grant \$ Budget Amount	Actual Expenditure	Total Actual Grant \$ Expended
Personnel (attach backup with category)	_____	_____	_____
Travel (attach backup with category)	_____	_____	_____
Supplies (attach backup with category)	_____	_____	_____
Other (attach backup with category)	_____	_____	_____
In-Direct (max of 10%) (attach backup with category)	_____	_____	_____
Total:	_____	_____	_____

Less Expenditures In Excess of Application Total Estimated Expenditures: _____

Total "To Date" Expenditures: _____

CLAIM REQUEST (_____ % OF REQUEST): _____

LESS PREVIOUS ADVANCES OF: _____

TOTAL CLAIM TO BE PAID: _____

I certify that this billing is correct and just based upon actual payment(s) of record by the grant recipient, and that the work and services are in accord with the approved grant.

Signature: _____ Date: _____

Print Name: _____ Phone: _____