

LOUISIANA CDBG REQUEST FOR PAYMENT (RFP)

A. Name, Address, and Telephone Number of Contractor (City/Parish)	B. Date of Request
C. Contract Number / Fiscal Year and Grant Type / CDBG Grant Representative	D. Request #

E. Actual Delivery Date (A.D.D.) - The most recent date of delivery of services for each State fiscal year.	A.D.D. FY 1:	
	A.D.D. FY 2:	

1. Status of LCDBG Funds	Amount	State Use Only
A. LCDBG Funds Received to Date		
B. Program Income Received to Date		
C. Subtotal		
D. Funds Disbursed to Date		
E. Cash on Hand at Time of this Request		
F. LCDBG Funds Requested but not yet Received		

2. Amount of Funds Requested by Activity	A.D.D. FY 1	A.D.D. FY 2	Amount	
A. Acquisition of Real Property				
B. Public Works, Facilities, Site Improvements				
1. Sewer				
2. Streets				
3. Water (Fire Protection)				
4. Water (Potable)				
5. Community Center				
6. Other				
C. Rehabilitation Housing (includes Rehabilitation for Public Works)				
D. Rehabilitation Administration				
E. Clearance, Demolition				
F. Relocation Payments				
G. Economic Development				
1. Commercial/Industrial Infrastructure Development				
2. Loan				
3. Other				
H. Planning and Management Development				
I. Administration				
1. Pre-agreement Costs				
2. Public Facilities, Housing, and Economic Development				
3. Other				
J. Total				

3. Certification

I certify that this Request for Payment has been drawn in accordance with the terms and conditions of the contract for the grant or loan and that the amount for which drawn is proper for payment to the drawer at the drawer's bank. I also certify that the data reported above is correct and that the amount of the Request for Payment is not in excess of current needs. **Approved and detailed invoices that equal or exceed the amount are attached.**

A. Date	Signature	Title
B. Date	Signature	Title

4. Approval (State Use Only)

A. Reviewed By	Date
B. Approved By	Date