

Conservation Partners Legacy Grant Program Payment Request Form

PO #:	Grantee:	Project Name:						
Grantee Payment Reference/ Invoice #: Request Work Period (Service/ Goods Received Dates): From: To: Amount of Request Final request for this grant? Choose one	I certify that I am the individual authorized to request funds; that all services rendered, materials purchased, and expenditures reported are in accordance with the contract agreement, and all original documentation is retained at our offices in the form of invoices, signed time records, and/ or canceled checks. <i>Copies</i> of these documents are attached as evidence of payment. An original signature is required on this payment form.							
	<table style="width: 100%; border: none;"> <tr> <td style="border: none; width: 60%; border-top: 1px solid black;">Signature</td> <td style="border: none; width: 40%; border-top: 1px solid black;">Date</td> </tr> <tr> <td style="border: none; border-top: 1px solid black;">Name</td> <td style="border: none; border-top: 1px solid black;">Title</td> </tr> <tr> <td colspan="2" style="border: none; border-top: 1px solid black;">Phone:</td> </tr> </table>		Signature	Date	Name	Title	Phone:	
Signature	Date							
Name	Title							
Phone:								
Remarks:								

Reminder: Please be sure to attach *copies* of invoices. Keep originals and a copy of this completed form for your records.

For Department Use Only

FY:	I have reviewed the evidence provided by the recipient for the goods, materials and/or services presented and they are eligible for payment under the work program.
	Payment approved in the amount of \$ _____
Vendor Name (if different):	By _____
	Date _____

**Conservation Partners Legacy Grant Program
Expenditure Report**

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Conservation Partners Legacy Grant Program Expenditure Report

PO Number	Organization	Project Name

Person completing this request	Daytime phone number

*Please provide information based on **this** payment request only. Only enter numbers; boxes have been formatted for dollar amounts. Attach all required documentation for grant funds requested and match spent.*

Grant Budget	Brief Description	Grant funds requested
Personnel		
Contracts		
Grant Admin		
Admin/ Enviro Compliance		
Fee Acquisition		
Easement Acquisition		
Easement Stewardship		
Professional Services		
Equip/Tools/Supplies		
Travel		
Additional Budget items		
TOTAL		

Match Budget	Brief Description	In-kind Match spent	Cash Match spent	Total spent
Personnel				
Contracts				
Grant Admin				
Admin/ Enviro Compliance				
Fee Acquisition				
Easement Acquisition				
Easement Stewardship				
Professional Services				
Equip/Tools/Supplies				
Travel				
Additional Budget items				
TOTAL				

Conservation Partners Legacy Grant Program Expenditure Report

Grant Budget Status:

Total grant	This request	Previous requests	Amount remaining

Match Budget Status:

Total match provided	This request	Previous requests	Amount remaining

Accomplishments: *Please provide information based on **this** payment request only.*

Planned sites		Planned quantities (acres, miles, structures etc)	
Sites in progress		Quantities in progress	
Completed sites		Completed quantities	

Narrative description of work to date:

Provide a concise description of the progress you have made to date, including any problems encountered. Include specifics such as # of acres restored, enhanced or protected, # of wetlands restored, trees planted, etc.