

Each project will have a Draw Request form specific to that project. It will include the task and budget amount found in the Grant Agreement budget section.

CDBG Draw Request Project Ledger

Project Name & Number				
Grant Agreement Period		From: _____ To: _____		
Grant Funds Recipient: _____				
GRANT FUNDS AWARDED _____				
Description	Request for Reimbursement	Request for Obligation	Net Reimbursement/ Obligation	Balance
Task #1:				
Request 1	-	-	-	
Request 2	-	-	-	
Request 3	-	-	-	
Request 4	-	-	-	
Sub-Total	-	-	-	-
Task #2:				
Request 1	-	-	-	
Request 2	-	-	-	
Request 3	-	-	-	
Request 4	-	-	-	
Sub-Total	-	-	-	-
Task #3:				
Request 1	-	-	-	
Request 2	-	-	-	
Request 3	-	-	-	
Request 4	-	-	-	
Sub-Total	-	-	-	-
Task #4:				
Request 1	-	-	-	
Request 2	-	-	-	
Request 3	-	-	-	
Request 4	-	-	-	
Sub-Total	-	-	-	-
Task #5:				
Request 1	-	-	-	
Request 2	-	-	-	
Request 3	-	-	-	
Request 4	-	-	-	
Sub-Total	-	-	-	-
Task #6:				
Request 1	-	-	-	
Request 2	-	-	-	
Request 3	-	-	-	
Request 4	-	-	-	
Sub-Total	-	-	-	-
	TOTAL REIMBURSEMENT REQUEST	TOTAL ADVANCE REQUEST	TOTAL REQUESTS SUBMITTED	FUNDING AGREEMENT CASH BALANCE
	0.00	0.00	0.00	0.00

Make sure your request is either a reimbursement or obligation.

Each request is consecutive to the prior request. Example: if you have Obligation #1 then the next will be Reimbursement #2.

All the cells but the shaded blue cells are locked. Each request entered on the Project Ledger form is linked and will automatically show on the Draw Request form.

Entering totals for either a Request for Reimbursement or Request for Obligation is all that is filled in on this form.

On the Draw Request form, enter the To and From dates to reflect the **invoice period**.

STATE OF NEVADA GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT					
Project I.D. & Name:	0				
Reporting Period:	From:				To:
Vendor #		Grant Amount	\$	-	
IDIS Activity ID		Draw Request	\$	\$0.00	
		Balance	\$	-	
CURRENT OBLIGATION REQUEST					
PROJECT TASK (Per Approved Work Plan)	Request 1	Request 2	Request 3	Request 4	Total Obligation Requests
-	-	-	-	-	-
-	-	-	-	-	-
-	-	-	-	-	-
-	-	-	-	-	-
-	-	-	-	-	-
TOTALS (Sum of lines thru):	\$ -	\$ -	\$ -	\$ -	\$ -
REIMBURSEMENT REQUEST					
PROJECT TASK (Per Approved Work Plan)	Request 1	Request 2	Request 3	Request 4	Total Reimbursement Requests
-	-	-	-	-	-
-	-	-	-	-	-
-	-	-	-	-	-
-	-	-	-	-	-
-	-	-	-	-	-
TOTALS (Sum of lines thru):	\$ -	\$ -	\$ -	\$ -	\$ -
CERTIFICATION By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 101 and Title 31, Section 3729-3730 and 3801-3812). I certify that the information reported is correct and expenditures are in accordance with the approved grant award. I also certify that the amount of funds requested is not in excess of current grant award.					
Prepared By:					Date:
Approved By:					Date:
GOED Program Specialist Approval:					Date:
GOED Administrator Approval:					Date:

Sign the Draw Request form and submit the signed Draw Request, Project Ledger, Invoice Detail, and Match (if applicable) in with the appropriate back up to include proof of payment and invoices in one PDF. Also make sure to include excel with request. Email to CDBG Specialist w/ CC to Program Administrator.

