

REQUEST FOR DISBURSEMENT FORM

| | | | | |
|---|--------------------|-----------------------------------|---|--------------------------|
| Name of Grantee/Contractor: | | Agreement No. | Invoice No. | |
| Address (include zip code): | | Project Name: | | |
| | | Billing Period Covered: | | |
| | | From: | To: | |
| Work Plan Task Number and Name | Task Budget | Costs Incurred this Period | Total Cost to Date | Remaining Balance |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| _____ % Indirect Cost (Fill in if applicable) | | | | |
| TOTAL | | | | |
| LESS: Five (5%) or Ten (10%) Percent Withhold (Fill in if applicable, enter amount as a negative number) | | | <i>Attach all receipts of expenditures, Progress Report, and other supporting documents required.</i> | |
| RELEASE OF WITHHOLDING | Final invoice | | | |
| TOTAL AMOUNT REQUESTED | | | | |

| GRANTEE/CONTRACTOR EXPENDITURE: | | |
|---|-------------------------|---------------|
| (A) Materials and Equipment | Receipt/Invoice# | Amount |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| SUBTOTAL | | |
| (B) Labor - Description (Job Title) and number of hours worked | Hourly Rate | Amount |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| SUBTOTAL | | |
| (C) _____% Indirect Cost (fill in if applicable) | | |
| (D) SUB-CONTRACTOR'S EXPENDITURE: | | |
| Company Name | Invoice # | Amount |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| SUBTOTAL | | |
| GRAND TOTAL (A+B+C+D)* | | |

NOTE: *Should agree with "Total Costs Incurred This Period" on page 1