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| --- | --- |
|  | Request for Funds (Drawdown/Payment Request) **Community Development Block Grant Program**Nebraska Department of Economic Development |
|  |  |
| **Name of Subrecipient** (Local Unit of Government) | **Mailing Address** | **City State ZIP**   |
| **CDBG Agreement Number** | **Federal Identification Number** | **DUNS Number** | **UEI Number** | **SAM Expiration Date** | **Number sequence order of funds** | **Final Drawdown** | **DED Program** **Representative** |

 **Part I – STATUS OF FUNDS**

|  |  |
| --- | --- |
| **1. CDBG Funds Received to Date** |  |
| **2. Add: Program Income Received to Date (exclude RLF)** |  |
| **3. Subtotal** |  |
| **4. Less: Federal Funds Disbursed To Date (Must Agree To Total Of Part II, Line 3)** |  |
| **5. Total: Federal Funds On Hand (Must Agree To Part II, Line 6)** |  |

 **Part II – CASH REQUIREMENTS** (Identify all activities listed in the CDBG Agreement, even if funds are not being requested.)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Activity/Budget Category |       |       |       |       |       |       | **TOTAL** |
| **1. Total Cash Requirements To Date** |  |  |  |  |  |  |  |
| **2. Less: Local Funds Disbursed (includes RLF)** (exclude Program Income) |  |  |  |  |  |  |  |
| 1. **Less: Federal Funds Disbursed** (include Program Income) Total Must Agree To Part I, Line 4 (exclude RLF)
 |  |  |  |  |  |  |  |
| **4. Total Current Cash Requirements** |  |  |  |  |  |  |  |
| **5. Less: Unpaid Previous Request.** |  |
| **6. Less: Federal Funds On Hand** (Must Agree To Part I, Line 5)  |  |
| **7. Net Amount of Federal Funds Requested** |  |

*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 1001 and Title 31, Sections 3729-3730 and 3801-3812). I also certify that the amount of the request for federal funds is not in excess of current needs.*

|  |  |  |
| --- | --- | --- |
| **Signature of Authorized Official (Mayor/Board Chairman)** | **Typed Name of Authorized Official** | **Date** |
| **Signature of Authorized Official (Clerk/Treasurer)** | **Typed Name of Authorized Official** | **Date** |
| **Person Preparing Request for CDBG Funds Form Name:**  | **Organization:**  | **Telephone Number:** | **Email:**  |

*PLEASE REFER TO INSTRUCTIONS FOR ADDITIONAL GUIDANCE.* INCOMPLETE OR INCORRECT FORMS WILL NOT BE PROCESSED *\*\*\*To update calculations, either tab two (2) fields or click on a different field with your mouse.*

**Instructions:** **CDBG Request for Funds (Drawdown/Payment Request)**

If a subrecipient has more than one CDBG agreement, funds must be requested separately. Carefully enter all requested information. Double check addition and subtraction. Funds requested must reflect actual eligible cost incurred. Claim exact amounts on each reimbursement down to the penny on the reimbursement request. Requests for funds are to be submitted only as funds are needed for immediate disbursement. Refer to the CDBG Administration Manual, Chapter 12 for more information.

With the exception of the final draw, or requested by DED, there is a **minimum to be drawn** as described below:

* **$500:** Request for general administration expenditures only.
* **$1,500:** Request amount for general administration and project expenditures
* **$1,500:** Request amount for project expenditures only

# Identifying Information

The top portion of the Request for CDBG Funds will be completed with the appropriate identifying information.

* *Name of Subrecipient:*  Input name of local unit of government who entered into the Agreement with DED.
* *Mailing Address:*  Input the mailing address of the subrecipient
* *CDBG Agreement Number:*  the number assigned to the contractual agreement between DED and the subrecipient.
* *Federal Identification Number:* Input the subrecipient’s federal identification number.
* *DUNS Number:* Input the subrecipient’s DUNS Number. If submitting a request after April 4,2022, this can be left blank.
* *UEI Number:* Input the Unique Entity Identifier number for the subrecipient. This can be located on sam.gov.
* *SAM Expiration Date:*  System for Awards Management (SAM) registrant expiration date to receive payment of federal funds. All entities receiving federal funds are required to have an active status within SAM.
* *Number Sequence Order of Funds:* Each request must be sequentially numbered by the subrecipient. Number each request for funds in sequence based on the signature date by the authorized officials.
* *Final Drawdown:* Input “yes” if this is the last request for CDBG; Input “no” if this is not the last request for CDBG funds.
* *DED Program Representative:* Identify the DED Representative who is the main contact associated with the CDBG Agreement.

# PART I: Status of Funds

Part I of the form will provide the status of CDBG funds for the related CDBG agreement.

*Line 1* List all CDBG funds received to date.

*Line 2* Add program income received from activities related to the CDBG agreement (exclude program income designated for revolving loan funds).

*Line 3* Subtotal Lines 1 and 2.

*Line 4* Subtract all disbursements of CDBG funds to date (MUST agree to total of Part II, Line 3).

*Line 5*  Federal funds on hand should reflect CDBG funds which have not been disbursed.

# PART II: Cash Requirements

Part II provides information on the subrecipient’s cash requirements. In the row labeled “Activity/Budget Category”, identify all the activity code and activity name (as shown in the Sources and Uses Section of the CDBG agreement) above each column. Be sure to complete Part II for all approved activities even if funds are not requested for all activities.

*Line 1*  Enter the total of all cash requirements to date for each activity/budget category. This amount should be equal to all expenditures paid to date plus cash needed to meet immediate cash obligations.

*Line 2* Subtract all local matching or other funds disbursed. (Include program income designated for revolving loan funds from prior CDBG agreements for same activities.) This will include local funds already expended and local funds, which will be expended to meet Line 1.

*Line 3* Subtract federal funds applied (include program income). The total of this row must equal the amount shown on Part I, Line 4.

*Line 4*  Subtotal by subtracting Lines 2 and 3 from Line 1. This amount should be equal the amount of federal funds needed for immediate cash obligations.

*Line 5*  Subtract the amount of any previous Request for CDBG funds, which has not yet been received.

*Line 6* Subtract the amount of federal funds on hand. This amount must equal the amount on Part I, Line 5.

*Line 7*  The net amount of federal funds requested is determined by subtracting Lines 5 and 6 from Line 4. This should be the amount of CDBG funds needed (when added to CDBG funds on hand and CDBG funds requested but not yet received) to meet immediate cash obligations.

# Signatures

Signatures of both the Mayor/Board Chairperson and the Clerk/Treasurer are necessary to process the Request for CDBG Funds. Signatures must agree to authorization signatures submitted to DED on the Authorization to Request Community Development Block Grant Funds. After signing and dating the Request for CDBG Funds, the subrecipient should retain a copy of the form and upload within AmpliFund.

**INCOMPLETE OR INCORRECT FORMS WILL NOT BE PROCESSED.**