

INSTRUCTIONS FOR REQUEST FOR PAYMENT FORM**Cells highlighted in yellow should be completed by Grantee****LINE:**

A	Enter name, address, including zip code, and telephone number of the Grantee.
B	Enter the date this request is being submitted.
C	Enter the Subrecipient Number.
D	Enter the Grantee's Federal Employer ID Number.
E	Enter the Grantee's Unique Entity Identifier Number from sam.gov.
F	Enter number of the request. Requests for Payment (RFP) are numbered sequentially. Your first request is #1, your second is #2, etc. If, for some reason, a request is returned to you for correction and resubmission, the resubmission would have the same number with an A after it, 2A. A second resubmission would be 2B.
G	Enter the most recent date of delivery of invoices for each State fiscal year covered in the invoices for this RFP. Each invoice must have the date of delivery or, in the case of services rendered, a beginning and ending date. Any services that cover 2 fiscal years must be in separate invoices or the amount allocated to each fiscal year must be indicated. Ex. FY1 May 5, 2010 to June 30, 2010 \$2,040, FY2 July 1, 2010 to August 5, 2010 \$1,920. Enter only the dollar amounts in E. If 2 fiscal years are used, break out the amounts in each FY column if more than 1 activity is used under #2.
H	This section to be completed by Grantee. 1 Enter the amount of funds the Grantee committed to the grant. 2 Enter the amount of match funds that have been expended and previously documented to OCD-LGA. 3 Worksheet calculates this cell automatically. Do not enter data in this cell. 4 Enter amount of match funds expended that Grantee is documenting with this request. Documentation of expenditures must be attached to this request. 5 Worksheet calculates this cell automatically. Do not enter data in this cell.
I	This section to be completed by Grantee. 1 Enter amount of WSP grant award. 2 Enter amount of WSP funds received to date. 3 Worksheet calculates this cell automatically. Do not enter data in this cell.
J	This section to be completed by Grantee. 1 Do not enter any data in this cell. 1a Enter the amount of WSP funds being requested with this submission for sewer grants. 1b Enter the amount of WSP funds being requested with this submission for water grants. 2 Do not enter any data in this cell. 2a Enter the amount of WSP funds being requested with this submission for engineering services. 2b Enter the amount of WSP funds being requested with this submission for administrative services. 3 Enter the amount of WSP funds being requested with this submission for acquisition costs. 4 Enter the amount of WSP funds being requested with this submission for other costs. 5 Worksheet calculates this cell automatically. Do not enter data in this cell.
K	This section to be completed by Grantee. 1 Authorized person's signature, title, and date.
L	OCD-LGA completes this section. OCD-LGA enters amounts approved for activities and identifies any costs to be paid by Grantee. OCD-LGA verifies expenditure of matching funds and enters amount of matching fund expenditures verified to date. OCD-LGA will email a copy of the RFP form to Grantee upon approval.