(07/15)

NYS Division of Homeland Security and Emergency Services
Detailed Itemization of Non-Personal Service Expenditures
Rent

1. Grantee Name: _____ 4. Corresponding FCR Report: _____

2. Implementing Agency: _____ 6. Contract Number: _____

3. Report Period: From: _____ To: _____ 7. DHSES Number: _____

5. Contract Period: From: _____ To: _____

This form is used to certify the expenditures claimed for Rent. The amounts charged to the grant for rent expenditures must be valid for this expense category per Appendix B of the contract. Allocations must be based on calculations supported with documentation and/or allocation worksheets that calculate the actual costs, and not based solely on the grant budgeted amounts. All rent expenses must have an appropriate and reasonable basis for allocating the expenses to this project.

8a Check No.	8b Payee	8c Property Address	8d Period of Time	8e Date Agreement Submitted	Amount Charged to 8f Federal/ State	8g Match
				8h * Total	$0.00	$0.00

* The totals should be carried forward to Category G of the Fiscal Cost Report Column C →

Note: Executed rental agreement must be submitted to DHSES with the first voucher requesting reimbursement for rental expenditures.

Certification: **I certify that the above expenditures were made in accordance with the pertinent grant, are appropriate to the goals and objectives of the project described therein, and are not duplicative of expenditures claimed on any other grants.**

9. Signature: _____ Print Name: _____

Title: _____ Date: _____ Phone #: _____