

CONTRACT COSTS RECORD FORM INSTRUCTIONS

Heading

- A. Fill in the name of the City/Town/Village, etc. that is receiving funds from New York State.
- B. Enter the Project # that was provided on the approval letter. (Ex. 4204-0075)
- C. Enter the Project Title that was included in the approval letter.
- D. Provide the period for which reimbursement is being requested.
- E. Enter the location where the work was completed.

Table

- F. Enter the name of the vendor or organization with whom the contract is with.
- G. Enter a brief description of the work completed during the time period for which reimbursement is being requested.
- H. Enter the contract number provided on the contract that your jurisdiction has with the vendor or organization.
- I. Enter the dates for the entire contract period. However, be advised that reimbursement can only be provided for the time period provided in approval letter.
- J. Enter the cost of the contract for the period that you are requesting reimbursement. Reimbursement can only be requested for work directly associated with the approved project.
- K. Enter the check/card/deposit number used to pay the vendor.
- L. Sign and date the Contract Costs form. Each record (page) must be certified by an authorized official. (*original signature, no copies*).

* Use additional sheets if necessary.

CONTRACT COSTS RECORD

(A) Sub-Recipient: _____ (B) Project Number: _____ - _____
 (C) Project Title: _____ (D) Period: _____ to _____ 20____
 (E) Location of Work: _____

(F) Vendor	(G) Description	(H) Contract #	(I) Contract Period	(J) Contract Cost	(K) Check #
1.					
2.					
3.					
4.					
5.					
6.					
Total Cost (this page)				\$	

I certify that the above information was transcribed from daily logs, vendor invoices, stock cards, or other documents which are available for audit.

(L) Certified by: _____ Title: _____

Print Name: _____ Date: _____