

**ALABAMA DEPARTMENT OF ECONOMIC AND COMMUNITY AFFAIRS
COMMUNITY AND ECONOMIC DEVELOPMENT DIVISION
REQUEST OF PAYMENT**

ADECA USE ONLY

Date _____ Request No. _____

Vendor #
FEIN #

Contract No. 1.	Contract Amount 2.
Amount of Request 3.	Program Income Earned 4.

5. Make Check Payable To: _____

6. ITEMIZATION REPORT						
Activities	Budget (\$)	Amount Previously Requested (\$)	Amount of this Request (\$)	Cumulative Amount/Contract (\$)	Balance of Contract (\$)	Activity Completion (%)
Administration						
Engineering						
Water						
Sewer						
Housing Rehab						
Streets/Roads						
Drainage						
Hookups						
Total						

7. _____ Match Required 8. _____ Match Disbursed/Obligated 9. _____ Balance of Match to Be Paid

Attach additional pages as needed for Housing Rehabilitation. If additional space is needed for item 6, attach pages.

Number of pages attached _____

I Certify that this request for payment has been drawn in accordance with the terms and conditions of the contract cited and that the amount drawn is proper for payment to the drawer or for credit to the account of the drawer at the drawer's bank. I also certify that the data reported above is correct and that the amount of the request for payment is not in excess of current needs.

Date	Signature	Title
Date	State Signature	

Jobs Created (#) _____	Other Remarks:
Homes Rehabbed (#) _____	
Parcels Cleared (#) _____	
Project status narrative (# of hook ups completed, l.f. of lines or # of street lights installed, etc.) _____	

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Activity #	Matrix #	\$ Amount	(IDIS)	Received CED
			CPS No. _____	
			Date Created _____	
			Voucher No. _____	
			P.I. _____	
			Initials _____	

			(Accounting)	Received Acct.
Voucher #	_____		IDIS Approval	_____
Date	_____		Date	_____
LOC No.	_____		RE Voucher	_____
PI Yr. Amt.	_____		RE Amt	_____