

**Vermont Department of Environmental Conservation** *Agency of Natural Resources*

**Form 430 Request for Funds**

*Form must be filled out entirely before payment is released*

**Grantee Name:**

**Grant #:**       **Purchase Order #:       Payment#:       Amount Requested:**

###

**Performance Measures and Deliverables:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Performance Measure and Submitted Deliverable** | **Budget Amount** | **Amount Requested** | **Remaining Amount** | **Total Match Documented (if applicable, use total from Form 430-M)** | **Match Committed (if applicable)** |
| **1** –  | $ | $ | $ | $ |  |
| **2 –**  | $ | $ | $ | $ |  |
| **3 –**  | $ | $ | $ | $ |  |
| **4 -**  | $ | $ | $ | $ |  |
| **5 –** Final report. | $ | $ | $ | $ |  |
| **Total** | $ | $ | $ | $ | $      |

**Approvals for Payment**

**Signed by:**

Grantee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*The Grantee certifies that deliverables being billed on this invoice have been completed as outlined in the grant agreement.*

State’s Project Manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*The Grant Manager has verified that deliverables being billed on this invoice have been completed as outlined in the grant agreement.*

DEC Financial Operations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*The DEC Financial Operations processed the current invoice for payment on signed date.*