

Participatory Budgeting · 555 Santa Clara Street · Vallejo · CA · 94590 · 707.648.4041 · Fax 707.648.4426

## Participatory Budgeting Program REQUEST FOR PAYMENT FORM

1. GRANTEE NAME and ADDRESS
2. PB PROJECT NAME
3. NUMBER AND PERIOD OF PURCHASE ACTIVITY
a) #:
b) From, 201 to, 201
4. AMOUNT OF PAYMENT REQUEST AND GRANT FUNDS BALANCE
a) Type of Payment Requested: Advance (through Purchase Order) Reimbursement Final
b) Grant Project Amount:
c) Funds Received to Date:
d) Available prior to this request (b. minus c.):
e) Amount of this request:
f) Remaining Funds after this Payment (d. minus e.):
5. PROJECT COSTS INCLUDED IN THIS REQUEST
a) Detail project costs in an itemized fashion. A "Budget Worksheet" is attached to use for this section. If an advance is being requested, please include a quote or bid from a vendor that the City can use to generate purchase order in addition to or in lieu of the Budget Worksheet. If a reimbursement is being requested, please include all invoices or receipts.

b) When possible, the City requests that items are purchased from vendors located in Vallejo. Please list any items

purchased outside of Vallejo and a brief explanation of why it was difficult to purchase locally.

NOTE: Requests for payment can include materials purchased or ordered after July 23, 2013.

## **BUDGET WORKSHEET**

DATE PURCHASED	ITEM	ITEM DESCRIPTION	NUMBER OF ITEM NEEDED	AMOUNT
TOTAL:				

## 6. APPLICANT SIGNATURE

Signature:

Printed Name		
Title		
Signature	Date	
Approved for Payment: Yes No	**OFFICIAL USE ONLY** Charge to G/L Account #:	

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

I hereby declare under the penalty of perjury that the goods or materials covered by this report have been performed in

accordance with the project specifications, are complete and accurate, and are eligible under the agreement.