

Project Information

Date	Project Number	Project Name	
Grant Type <input type="checkbox"/> Recreational Trails Program (RTP) <input type="checkbox"/> Land & Water Conservation Fund (LWCF) <input type="checkbox"/> Other - specify:			
Grant Award Amount (from Grant Award Agreement)		Request Dates - From	Request Dates - To
Project Sponsor Name		Reimbursement Request Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> Final	
Address		City	State ZIP Code

Section 1: Accumulation Total

Current Request Reimbursement Amount	Previous Requests Reimbursement (cumulative)	Total Reimbursement Requested To Date
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Section 2: Summary of Total Project Amount Affiliated with this Request (from Section 4)

Design and Engineering Fees	
Construction Contracts	
Supply and Material Purchases	
Equipment Rental Costs	
Force Account Labor Costs	
Other:	
TOTAL	
<input type="checkbox"/> By checking this box, the Authorized Representative certifies the full and proper payment has been made to the vendor.	

Section 3: Summary of all Project Match Funds Affiliated with this Request (from Section 5) - This should equal or overmatch the match requirement of the grant.

Cash	
Donated Equipment	
Donated Labor	
Donated Materials	
Force Account Labor	
Other:	
TOTAL	
Match Fund Requirement (from Grant Award Agreement) <input type="checkbox"/> 20% <input type="checkbox"/> 50% <input type="checkbox"/> Other - specify:	

Signature

<input type="checkbox"/> By checking this box and typing my name below, I am signing this document electronically. I agree that my electronic signature is the legal equivalent of my handwritten signature. I agree that the electronic signature appearing on this document has the same validity and enforceability as a handwritten signature.		
Signature of Authorized Grantee	Title	Date

ND Parks and Recreation Department (NDPRD) Approvals

NDPRD Grants Coordinator (typed signature is equivalent to a handwritten signature)	Date
NDPRD Division Manager (typed signature is equivalent to a handwritten signature)	Date

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Line		Department	
Fund		Expense	
Project		Activity	
Amount		Vendor	

Section 4: Tabulation of all Project Costs for this Reimbursement Request

List all project costs to support the total identified in Section 2. Documentation such as invoices should be provided with your costs to verify payment and value.

Vendor	Invoice Number	Category	Amount
TOTAL			

Section 5: Tabulation of Match Funds for this Reimbursement Request

List all sources of match funds to support the total identified in Section 3. Documentation for donated items should be supported with the appropriate state forms (identified with a state form number, SFN, in upper left corner of form). See Section 7. This should equal or overmatch the match requirement of the grant program.

Vendor	Category	Amount
TOTAL		

Section 6: Supporting Documentation

Supporting documentation must be included for each item claimed for reimbursement. Please check the column to ensure all proper documentation is included for submission.

Supporting Documentation	Yes	No	N/A
Affidavit of Publication (supplied by the newspaper when advertising for bids)			
Bid tabulations or quotations			
Meeting minutes directing intent to award			
Vendor or contractor invoices or receipts			
Equipment rental time records			
Donated Equipment Value (SFN 59169)			
Donated Labor Value (SFN 59170)			
Force Account Labor documentation (SFN 59171)			
Donated Material Value (SFN 59172)			
Other - specify:			

Section 7: Supporting Links

NDPRD Recreation Trails Program (RTP): <https://www.parkrec.nd.gov/business/grants/recreation-trails-program>

NDPRD RTP Manual:

- SFN 59169 - *Donated Equipment Value*
- SFN 59170 - *Donated Labor Value*
- SFN 59171 - *Force Account Labor Documentation*
- SFN 59172 - *Donated Material Value*

IRS Form W-9: <https://www.irs.gov/pub/irs-pdf/fw9.pdf>

Federal Highway Administration (FHWA) <https://www.fhwa.dot.gov/programadmin/contracts/1273/1273.pdf>
(Form 1273)

FHWA Buy America (Steel) <http://dot.nd.gov/dotnet2/view/forms.aspx>

Certificates of Compliance:

- SFN 61040 - *Contractor Certificate of Compliance*
- SFN 61041 - *Manufacturer Certificate of Compliance*

FHWA Recreation Trails Program (RTP): https://www.fhwa.dot.gov/environment/recreational_trails/guidance/

NDPRD Land and Water Conservation Fund Program (LWCF): <https://www.parkrec.nd.gov/business/grants/recreation-trails-program>

NDPRD LWCF Manual:

- Statewide Comprehensive Outdoor Recreation Plan 2018-2022
- SFN 59169 - *Donated Equipment Value*
- SFN 59170 - *Donated Labor Value*
- SFN 59171 - *Force Account Labor Documentation*
- SFN 59172 - *Donated Material Value*