*Please complete this payment request form and upload it to the Submit Payment Request task in Easygrants. If you have any issues completing this form, please contact your grant administrator.*

|  |
| --- |
| **Basic Payment Information (questions 1-8 are required for all payment requests)** |
| **1. Project Title (From Agreement):** Click here to enter project title. |
| **2. NFWF ID Number:** Click here to enter Easygrants ID Number. |
| **3. Payee Organization** (If Payee Organization is a third party, please contact your grant administrator)**:** Click here to enter Organization Name. |
| **4. Total Payment Amount Requested: $**Click here to enter amount requested. |
| **5. Final Payment?:** Choose an item. |
| **6. Payment Request Type:** Choose an item. |
| **7A. Do you have remaining funds from previous disbursements from NFWF for this project?:** Choose an item. |
| **7B. If “Yes”, please provide an explanation including the amount that remains unspent and expected timeline for expenditure:** Click here to enter text. |
| **8A. Have there been any developments that may have a significant impact on the project budget, matching contributions, period of performance, or scope of work?:** Choose an item. |
| **8B. If “Yes”, please provide an explanation of the development and potential impacts:** Click here to enter text. |

|  |
| --- |
| **Reimbursement Request Information** |
| **9. Reimbursement Amount** $ Click here to enter amount requested. |
| **10A. Reimbursement Period of Expenditure:** Click here to enter the start date. **-** Click here to enter the end date. |
| **10B. If your period of expenditure start date is older than six months, please explain the delay in requesting reimbursement:**  Click here to enter text. |

|  |
| --- |
| **Advance Request Information** |
| **11. Advance Amount** $ Click here to enter amount requested. |
| **12A. Anticipated Period of Expenditure:** Click here to enter the start date. - Click here to enter the end date. |
| **12B. Advance payment must be limited to the minimum amount needed and be timed to be in accordance with actual, immediate cash requirements. The timing and amount of advance payments must be as close as is administratively feasible to the actual disbursements by NFWF Subrecipient. NFWF Subrecipient must maintain both 1) written procedures that minimize the time elapsing between the transfer of funds and disbursement and 2) appropriate financial management systems that meet the needs and standards for fund control and accountability established in the applicable Agreement. Please provide an explanation for why funds are needed in advance and which budget items the funds will be spent on:**  Click here to enter text. |

|  |
| --- |
| **Expenditure Information** |
| **13. For projects that do NOT have a budget in Easygrants, provide a summary of project expenses to date:** |
| Click here to enter text. |

|  |  |
| --- | --- |
| I certify to the best of my knowledge and belief that the payment request is true, complete, and accurate. The expenditures, disbursements, and cash receipts are for the purposes and objectives set forth in, and otherwise compliant with, the applicable Grant Agreement, Project Funding Agreement, Contract for Services, or other agreement with NFWF (each, an “Agreement”). Such expenditures and costs have been or will be expended within the Period of Performance for the applicable project and within the applicable Agreement’s term. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812). | |
| **Typed Name and Title**: Click here to enter Name and Title. | **Date**: Click here to enter a date. |