



DEPARTMENT OF ENVIRONMENT, GREAT LAKES AND ENERGY
MATERIALS MANAGEMENT DIVISION

**FISCAL YEAR 2019 RECYCLING GRANT PROGRAM
REQUEST FOR PAYMENT**

GRANTEE NAME:	
GRANT AMOUNT REQUESTED: \$	THIS PAYMENT REQUEST IS A: PARTIAL <input type="checkbox"/> OR FINAL <input type="checkbox"/>
TIME PERIOD COVERED BY REQUEST:	

Budget Item	Cost/ Budget Item	Total Amount	Local Match Amount Provided	Grant Amount Requested
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The Grantee must include proof of payment to the vendor (such as cancelled checks, vendor invoices, ACH, wire transfer confirmations, bank statements, etc.), and proof of receipt of goods with each request for payment. The State will reimburse the Grantee the grant reimbursement percentage identified in the Grantee's agreement for the eligible payments made by the Grantee up to the final grant amount, less a five percent retention amount that will be paid when the final report is received.

By submitting and signing this request for payment, the Grantee certifies that all expenditures contained herein are eligible for reimbursement under this grant. The Grantee acknowledges that falsification of records may result in the termination of the grant agreement and other appropriate legal remedies.

Grantee's Signature

Date

Mailing address for completed Request for Payment:
EGLE-RecyclingGrant@Michigan.gov

Please ensure all scanned documents are clear and legible. Retain original hard copies for your records.

EGLE Office Use Only	
Approved to Process Payment of: \$ _____	
_____ EGLE Project Manager	_____ Date