



OREGON DEPARTMENT OF AGRICULTURE REQUEST FOR RELEASE OF FUNDS

Grantee Name: _____

Payee: _____ **Phone:** _____

Grant Number: _____ **Grant Name:** _____

Payment Request Number _____ **OR** **Final Request** _____

In accordance with the terms of the Grant Agreement and the Budget Categories: Definitions & Policy document, I request funds as follows:

Budget Category	Current Budget Amount	Total of All Amounts Previously Paid	CURRENT Request Amount	TOTAL Requested to Date	Remaining Budget
Salary, Wages and Benefits					
Contracted Services					
Travel					
Materials and Supplies					
Equipment and Software					
Other					
Grant Admin / Indirect Costs					
Post Grant					
TOTALS					

Copies of receipts, invoices or supporting documentation, for amounts \$2,500 or more will be required by ODA. An expense tracking spreadsheet for all expenses is also required to document all funds.

By signing this request, I declare that expenses for this grant are to the best of my knowledge true, correct, and complete. Grantee's signature on this form certifies that all funds being requested under the "Current Request Amount" column are for project activities that either do not require permit(s)/license(s), or copies of required permit(s)/license(s) for project activities have been provided to the SIA SPECIALIST.

The individual signing on behalf of the Grantee hereby certifies and swears under penalty of applicable law that s/he is authorized to act on behalf of Grantee.

Grantee's Authorized Signature: _____ **Date:** _____

Print Signature Name: _____ **Title:** _____

Name and Phone Number for Billing Questions: _____

E-mail Address for Billing Questions: _____

This request must be signed and forwarded to the SIA SPECIALIST for signature below.

I find this request to be consistent with the Grant Agreement and all funding conditions have been met. SIA SPECIALIST: _____ **Date:** _____
MANAGER: _____ **Date:** _____