



City of Westfield

Department of Community Development
Community Development Block Grant

Contract #_
Purchase Order #

Public Service Request for Payment HUD FY 2023 CITY FY 2024

Agency:
Address:

Approved Grant Amount:

Date:
Quarter # _____

Please provide documentation in support of each line item being submitted for reimbursement.

Budget Line Item Category	Budgeted Amount	Prior Requests Paid to Date	Current Request		Balance on contract

CURRENT REQUEST
CURRENT BALANCE ON CONTRACT

I, _____ do hereby certify that the costs contained within this requisition are true, accurate, and complete. I further represent that the costs are adequately documented by the attached source documentation and that all expenses were necessary and directly related to the operation of the Community Development Block Grant (CDBG) program.

Authorized Agency Representative

Date

CITY USE ONLY

Reviewed:	
Approved:	
Scheduled:	

