

EXHIBIT "B"

New Mexico Economic Development Department (EDD)
New Mexico MainStreet Capital Outlay Grant FY2010

(EDD use only)
Request # _____



Payment Request Form (To Be Used for FY2010 Grants Only)

This form must be completed in its entirety. Any incomplete form or illegible form will not be processed.

Grant Number: _____

Reporting Period: _____

Title of Project: _____

Date of Request: _____

I. Grantee Information

- A. Grantee
B. Payee (entity that the check should be made out to)
C. Payee Mailing Address (must be official address on file with DFA)
D. Contact Person Regarding this Form
E. Telephone
F. Email

II. Payment Computation

- Check One: [] Partial Payment [] Final Payment (due by 4/30/12)
A. Total Grant Amount
B. Grant Funds Received to Date
C. Total Grantee Match to Date
D. Total Invoice Amount For This Payment Request
E. Total Invoice Amount Excluding Taxes (EDD will not reimburse for taxes paid by the Grantee.)
F. Total Amount Requested For This Payment
G. Grantee Match For This Payment
H. Grant Balance

III. Attachments

Attachments REQUIRED with submittal for reimbursement*: *(Must be submitted in this order)

- A. Proof of when services were entered into and completed or when purchases were made (dated invoice from contractor or consultant, dated receipt, etc.). All services and purchases must correspond with the detailed budget, Exhibit A of your executed Grant Agreement.
B. Proof of Payment (copies of both sides of cancelled checks).
C. Grantee Match Detail Form.
D. Final Report, if applicable. (Only attach if requesting Final Payment.)

IV. Certification

Under penalty of law, I hereby certify to the best of my knowledge and belief, the above information is correct; expenditures are properly documented, and are valid expenditures or actual receipts. Grantee's match in the form of cash expenditures and in-kind contributions are properly documented, and are valid expenditures or contributions or actual receipts.

Grantee Fiscal Officer, print name Date

/s/ _____

Date: _____

SWORN TO AND SUBSCRIBED

before me on this _____ day

of _____, 200__

Notary Public _____

My Commission expires _____

Grantee Representative, print name Date

/s/ _____

Date: _____

SWORN TO AND SUBSCRIBED

before me on this _____ day

of _____, 200__

Notary Public _____

My Commission expires _____

(EDD/NMMS Use Only)

Meghan Bayer, Grant Monitor DATE



EXHIBIT "C"

New Mexico Economic Development Department (EDD)
New Mexico MainStreet Capital Outlay Grant FY2010

Grantee Match Detail Form (To Be Used for FY2010 Grants Only)

You are required to provide matching funds of one dollar (\$1.00) in match for every ten dollars (\$10.00), or 10% of your total grant award.

The Grantee's match may be in the form of cash or in-kind contributions by the Grantee or any of the Grantee's partners specifically identified on the Grant Agreement.

An in-kind contribution is any item of cost that is necessary for the completion of the work and that has a verifiable and accountable economic value. Some examples of eligible in-kind contributions include the following:

- MainStreet Manager's time dedicated to coordinating project activities;
Value of the time and cost associated with a town assigning a town planner or designer to project activities;
Items of cost borne by the Town or one of the Town's partners involved in the project;
The cost of publicizing notices of meetings and events.

To Be Completed by the Grantee and Submitted with Each Payment Request Form

This form must be completed in its entirety. Any incomplete form or illegible form will not be processed.

I. Grantee Information

Grant Number _____ Reporting Period _____
Grantee _____
Title of Project _____
Total Grant Amount _____
Total Amount Requested For This Payment _____

II. Grantee Match

Grantee Match for this Payment (must equal at least 10% of Amount Requested for this Payment)

Breakdown of Grantee Match: [] Cash Match (specify dollar amount) _____
[] In-Kind Match (specify dollar amount) _____
Total _____

III. Explanation of Grantee Match

Provide Detailed Explanation of Grantee Match for this Payment.

Example:

Table with 3 columns: Item #, Description, Dollar Amount. Example rows include 'Cash, GRT paid to contractor' for \$3,500 and 'In-Kind, MainStreet Manager's time' for \$600, totaling \$4,100.

To be filled out by Grantee:

Table with 3 columns: Item #, Description, Dollar Amount. Includes a total row for 'Total Match by Grantee for this Payment'.



EXHIBIT "D"

New Mexico Economic Development Department (EDD) New Mexico MainStreet Capital Outlay Grant FY2010

Final Report (To Be Used for FY2010 Grants Only)

To be completed by Grant Supervisor (as identified in your executed Grant Agreement) and **submitted with the Final Payment Request Form**

This form must be completed in its entirety. Any incomplete form or illegible form will not be processed.

I. Grantee Information

Grant Number _____

Date of Final Report _____

Grantee _____

Title of Project _____

Total Grant Amount _____

II. Please provide a detailed report on the project referenced above. Include the following information:

- Description of accomplishments to date,
- Methods and procedures used,
- Statement of the impact of the project,
- Detailed budget breakdown of expenditures,
- Description of any problems or delays encountered, and
- Any other information that may be of assistance to the Economic Development Department in its evaluation of your project.

I hereby certify that the aforementioned 2008 New Mexico MainStreet Capital Outlay Project has been completed and funds were expended in accordance with the Project Description and Budget (Exhibit A) of the Grant Agreement, and in compliance with all other applicable state/regulatory requirements.

Grant Supervisor:

Printed Name

Title

Signature

Date