Date

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| --- | --- |
| **APPROVED BY** |  |
| **CGL PROCESSOR** |  |
| **DATE PROCESSED BY CGL** |  |
| **GRANT#/FUND SOURCE YEAR** |  |
| **DGS ITEM #** |  |
| **AMT. APPROVED** |  |
| **DIRECT/REIMBURSEMENT** |  |

# **Mr. Chinweike Eseonu**

Capital Grants Program

Maryland Department of General Services

301 West Preston Street, Room 703

Baltimore, Maryland 21201

Re: (Project Name)

(County/Baltimore City)

(Bond Year-DGS Number)

Dear **Chinweike,**

The Maryland Board of Public Works (BPW) approved a commitment of funds for the (grantee organization)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ . We are submitting a request for payment in the amount of $ as shown below.

**Payment Options [Circle which may apply]:**

**[1] Grantee Reimbursement:** Attach a copy of the Contract Eligibility letter that lists the contractor(s) that are eligible for grant participation and thecost schedule with copies of invoices and canceled checksdocumenting eligible expenditures.

**[2] Vendor Payment :** Attach a copy of the Contract Eligibility letter that lists the contractor(s) that are eligible for grant participation and the cost schedule and **original** invoices for eligible costs.

Pay the following:

Payee Federal ID# Amount

Under penalty of perjury, we certify that the work and services for which payment is requested above has been performed and/or received and payment should be made. The work has been performed and the goods and services have been received in accordance with the terms of the Chapter stated above as passed by the Maryland General Assembly and in accordance with the respective Board of Public Works agenda items.

The One-Stop Payment Inquiry system for vendors to complete registration is:

<https://interactive.marylandtaxes.gov/extranet/gad/GADLogin/login.asp>

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_ \_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_