



Remit to:
 Benton Franklin Community Action Connections
 720 W Court St
 Pasco, WA 99301

Project Location: City limits, Kennewick, Pasco and Richland

Invoice Date: _____

Send to:
 City of Richland
 Development Services Department
 Attn: Toni Lehman
 625 Swift Blvd., MS-18
 Richland Washington 99352

HOME - Tenant Based Rental Assistance

Month of Service: Check if final invoice _____
Amount billed for this Month: \$0.00

MONTH,DAY,YEAR - MONTH,DAY,YEAR
Agreement # HOME
Vendor 10713

Obj	Org	Billed this month	Total to date	Award Total	Balance
	D8587110				
	general Administration	-	-		
	D8587110				
	TBRA-Richland	-	-		#VALUE!
	TBRA-Kennewick	-	-		#VALUE!
	TBRA-Pasco	-	-		#VALUE!
	Total Net City Reimbursement	\$ -	\$ -	\$ -	\$ -

Project Manager Desk Monitoring:
Authorized Signature _____
Eligible, Allowable Costs _____
Compliance with Project Budget _____

CERTIFICATE:

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

SIGNATURE: _____ **DATE:** _____

Billing Invoice will only be paid based on provider attaching the required supporting documentation.			
Required attachments:		Check mark indicates compliance	Check mark indicates compliance
1) Statement of Revenue and Expenses	<input type="checkbox"/>	4) CAC Distbursement Vouchers	<input type="checkbox"/>
2) Payroll Summary	<input type="checkbox"/>	5) Exhibit J TBRA Setup Form	<input type="checkbox"/>
3) MIP	<input type="checkbox"/>		
(Community Services Use Only)			
<u>Comments/Notes to Fiscal</u>			
Sufficient Funds Budgeted (fiscal): _____			

DATE STAMP
CSHCD Use only