



IDPR/SWI 50.7
6/23

Idaho Department of Parks and Recreation
Request for Reimbursement/Close-out Report

1. Request # 1 2. Project Name Boating Safety Grant 3-a. Grant # 340RBSLE
CFDA #'s are for Federally funded grants 3-b. CFDA# 97-012

4. Project Period Federal FY 24, 10/01/23-9/30/24 5. Partial Payment Closeout

6. Project Applicant (Payee) _____

7. Grant Manager _____

8. Address _____

9. Phone _____ 11. Email _____

Grant Funds (IDPR)

Original Grant Amount.....
Amount Requested This Form.....
Amount Previously Expended.....

Balance

Match Funds (Applicant)

Match Committed.....
Match Reported This Form.....
Match Previously Reported.....

Balance

Note: Furnishing false information may constitute a violation of applicable state and federal laws. I certify that the above data is correct based on the contractor's official accounting system and records, consistently applied and maintained, and that the costs shown have been made for the purpose of, and in accordance with, the terms of the grant contract. The funds requested are for reimbursement of actual costs made during this time period, and I certify that documentation of costs requested are retained in our files for future audits.

Authorized
Signature _____ Title _____ Date: _____

Submit to: phoebe.wallace@idpr.idaho.gov