PLEASE SUBMIT REIMBURSEMENT ON

COMMUNITY LETTER HEAD

CDBG-__ __ __ - __ __/__ __/__ __ $ __ __ __,__ __ __.__ __

COMMUNITY ABBREVIATION **DATE** **TOTAL AMOUNT OF FUNDS REQUESTED**

Cherri Janeczek-Contract Compliance Unit
Oakland County Community & Home Improvement
Oakland Pointe, Suite 1900
250 Elizabeth Lake Road
Pontiac, Michigan 48341-0414

RE: Request for Reimbursement

The _____ is requesting reimbursement of CDBG funds
NAME OF CITY, TWP OR VILLAGE

in the amount of $ _____ for the following project.

GRANT YEAR	ACCOUNT #	ACCOUNT NAME	AMOUNT	BALANCE
			$	$
			$	$
			$	$

- ***PLEASE SUBMIT SEPARATE REIMBURSEMENT REQUEST FOR EACH PROJECT***

Please make checks payable to : _____
TREASURER CITY, TWP OR VILLAGE

_____

_____
ADDRESS

Sincerely,

_____
SIGNATURE & TITLE

Phone: _____

Email: _____