



## FACADE IMPROVEMENT PROJECT

### Facade Improvement Grant Disbursement Request

This form is to request grant funds AFTER the project is one hundred percent (100%) complete.

Applicant's Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Award Amount: \_\_\_\_\_

- Complete the below expenditure log.
- Only use approved vendors as outlined in your application request.
- Do not include ineligible expenses.
  - Attach RECEIPTS OR OTHER PROOF OF PAYMENT from each vendor.
  - Attach photo(s) of building renovations.

APPROVED VENDOR	DESCRIPTION OF SERVICES	INVOICE AMOUNT	GRANTOR PORTION 75%	GRANTEE PORTION 25%
ABC Company	Stucco	\$13,500.00	\$10,125.00	\$3,375.00
TOTAL		\$	\$	\$

Remit this form, receipts, and photos to:

**Barton County Façade Improvement Grant**

Diana Watson, Administrative Assistant

1400 Main, Room 107

Great Bend, Kansas 67530

620.793.1800 / [dwatson@bartoncounty.org](mailto:dwatson@bartoncounty.org)

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