

NEW MEXICO ENVIRONMENT DEPARTMENT  
CONSTRUCTION PROGRAMS BUREAU

**DISBURSEMENT REQUEST FOR PROJECTS WITH FISCAL AGENTS**  
**SPECIAL APPROPRIATIONS PROGRAM (SAP)**

Refer to page 2 of PDF document for further details items 1-21

A. NAME OF ENTITY **1** \_\_\_\_\_  
B. PROJECT NUMBER **2** \_\_\_\_\_

C. DISBURSEMENT REQUEST NUMBER **3** \_\_\_\_\_  
D. GRANT AMOUNT **4** \_\_\_\_\_

|                         | PREVIOUS EXPENDITURES |                      | CURRENT EXPENDITURES |                      | CUMULATIVE            |                       | FUNDS REMAINING        |                       |
|-------------------------|-----------------------|----------------------|----------------------|----------------------|-----------------------|-----------------------|------------------------|-----------------------|
|                         | NMED-PROGRAM <b>5</b> | OTHER FUNDS <b>6</b> | NMED-PRO <b>7</b>    | OTHER FUNDS <b>8</b> | NMED-PROGRAM <b>9</b> | OTHER FUNDS <b>10</b> | NMED-PROGRAM <b>11</b> | OTHER FUNDS <b>12</b> |
| Administrative Expenses | XXXXXXXXXX            |                      | XXXXXXXXXX           |                      | XXXXXXXXXX            |                       | XXXXXXXXXX             | -                     |
| Engineer Fees           |                       |                      |                      |                      |                       |                       | \$ -                   | \$ -                  |
| Other Professional      |                       |                      |                      |                      |                       |                       | \$ -                   | \$ -                  |
| Service Fees            |                       |                      |                      |                      |                       |                       | \$ -                   | \$ -                  |
| Inspection Fees         |                       |                      |                      |                      |                       |                       | \$ -                   | \$ -                  |
| Property Acquisition    |                       |                      |                      |                      |                       |                       | \$ -                   | \$ -                  |
| Construction Cost       |                       |                      |                      |                      |                       |                       | \$ -                   | \$ -                  |
| Planning Cost           |                       |                      |                      |                      |                       |                       | \$ -                   | \$ -                  |
| Equipment               |                       |                      |                      |                      |                       |                       | \$ -                   | \$ -                  |
| Other Costs (specify)   |                       |                      |                      |                      |                       |                       | \$ -                   | \$ -                  |
| Contingencies           |                       |                      |                      |                      |                       |                       | \$ -                   | \$ -                  |
| <b>TOTAL</b>            |                       | \$ -                 | \$ -                 | \$ -                 | \$ -                  | \$ -                  | \$ -                   | \$ -                  |

**Certification:** Under penalty of law, I certify that all the above expenditures are true and correct and are for appropriate purposes in accordance with the terms and conditions of the pertinent Loan/Grant Agreement; that all of the above expenses are properly documented, and are actual invoices; that payment has not been received; and that the grant activity is in full compliance with Article IX, Sec. 14 of the New Mexico Constitution known as the "anti-donation" clause.

|  |                                     |                     |                    |
|--|-------------------------------------|---------------------|--------------------|
| Signature of Authorized Official:<br>X <b>13</b> | Typed or Printed Name:<br><b>14</b> | Phone:<br><b>15</b> | Date:<br><b>16</b> |
| Signature of Fiscal Agent:<br>X <b>17</b>        | Typed or Printed Name:<br><b>18</b> | Phone:<br><b>19</b> | Date:<br><b>20</b> |

**21** For Fiscal Agent Signature:  
SWORN TO AND SUBSCRIBED before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Notary Public \_\_\_\_\_ My Commission expires \_\_\_\_\_

**NEW MEXICO ENVIRONMENT DEPARTMENT  
CONSTRUCTION PROGRAMS BUREAU**

**INSTRUCTIONS FOR (SAP)  
DISBURSEMENT REQUEST FOR PROJECTS WITH FISCAL AGENTS**

1. **NAME OF ENTITY**  
The name of the entity on the loan or grant agreement documents.
2. **PROJECT NUMBER**  
Available from the loan or grant agreement.
3. **DISBURSEMENT REQUEST NUMBER**  
The number of the pay request. (Self Explanatory)
4. **GRANT AMOUNT**  
The approved budget amount of the Grant. Expenditures should be listed by category- i.e. engineering, construction, etc.
5. **NMED PROGRAM (Previous Expenditures)**  
The first disbursement request will be zero. After the first disbursement request, the "PREVIOUS EXPENDITURES" column should reflect the "Cumulative Expenditures" figures from the previous disbursement request. (Example: "Previous Expenditures" in disbursement request number four should be identical to "Cumulative Expenditures" in disbursement request number three.)
6. **OTHER FUNDS (Previous Expenditures) (Optional)**  
Report expenditures for other funds.
7. **NMED PROGRAM (Current expenditures)**  
You must reflect the dollar amount you are requesting payment for on this disbursement request.
8. **OTHER FUNDS (Current expenditures) (Optional)**  
Same as Number 6, except report current expenditures from other funds.
9. **NMED PROGRAM (Cumulative)**  
Add the "Previous Expenditures" column and the "Current Expenditures" column and reflect the sum in this column.
10. **OTHER FUNDS (Cumulative) (Optional)**  
Same as Number 8, except report other funds cumulative.
11. **NMED PROGRAM (Funds Remaining)**  
The Grant Amount Less the Cumulative.
12. **OTHER FUNDS (Funds Remaining) (Optional)**  
Report other funds remaining.

13. **SIGNATURE OF AUTHORIZED OFFICIAL**  
The person signing must be an authorized representative who has been designated by a resolution passed by the governing body as the signatory authority for this project.
14. **TYPED OR PRINTED NAME**  
The typed or legibly printed name of the authorized Signatory Authority who signed the disbursement request.
15. **PHONE**  
Enter authorized Signatory Authority's phone number.
16. **DATE**  
Date disbursement request is signed.
17. **SIGNATURE OF FISCAL AGENT -** Must be notarized. Fiscal Agent must be shown on Fiscal Agent Resolution.
18. **TYPED OR PRINTED NAME**  
The typed or legibly printed name of the Fiscal Agent.
19. **PHONE**  
Enter Fiscal Agent's phone number.
20. **DATE**  
Enter the date signed.
21. **NOTARY PUBLIC**  
Disbursement must be signed and notarized.