



## Community Development Block Grant Request for Funds for Planning Grants

SECTION I - CDBG PL RECIPIENT INFORMATION				
CDBG CONTRACT NUMBER MT-CDBG-PL-		DRAWDOWN NUMBER	TOTAL AMOUNT REQUESTED	
NAME AND ADDRESS OF CDBG RECIPIENT:		MAKE DEPOSIT PAYABLE TO:  LAST FOUR OF ACCOUNT & ABA (ROUTING) NUMBERS:		
SECTION II - FINANCIAL INFORMATION				
	A Amount of CDBG Grant	B CDBG Grant Amount Expended Prior to This Draw	C CDBG Grant Amount Requested	D CDBG Grant Balance Remaining After This Draw
ENGINEERING/PROF SERVICES				
SECTION III - PROJECT STATUS -Please provide a brief description of what has been accomplished.				
SECTION IV - LOCAL APPROVAL - Please also attach closeout form if this is the final draw. Submit draw requests and supporting documentation to: Montana Department of Commerce, P.O. Box 200523, Helena MT 59620-0523.				
DATE:	SIGNATURE		TITLE	
DATE:	COUNTERSIGNATURE		TITLE	
SECTION V - Commerce APPROVAL				
EXPENDITURES ARE REASONABLE; APPROPRIATE FINANCIAL NUMBERS; SIGNATURES CORRECT; AND CONSISTENT WITH PRECEDING DRAW AND SABHRS.		APPROVED BY:  TITLE:  DATE:		

Montana Department of Commerce | [commerce.mt.gov](http://commerce.mt.gov)

P.O. Box 200523 | Helena, MT 59620-0523 | Phone: 406-841-2770 | Fax: 406-841-2771

Montana 711: [dphhs.mt.gov/detd/mtap/traditionalrelayservice](http://dphhs.mt.gov/detd/mtap/traditionalrelayservice)