

This form is for use by State grantees of the Community Development Block Grant program in order to demonstrate compliance with timely distribution requirements pursuant to 24 CFR 570.494(b)(1).

1. Name of State Grantee (as shown in item 5 of Standard Form 424)	3. Fiscal Year (Fiscal year of the grant funds)
2. Grantee's Complete Address (as shown in item 5 of Standard Form 424)	4. Grant Number (Format "B-##-DC-##0001")
	5. Date Signed by State (Date grant agreement, HUD 7082, was signed by the state)
6. Compliance Date (Line 5 plus 15 months.)	7. State CDBG Grant Amount (Excluding program income and prior year grants).
ADJUSTMENTS	
8. Administrative Cost Allowance 24 CFR 570.489(a)	12. Expected Distribution (Line 7 minus Line 11)
9. Technical Assistance Allowance 24 CFR 570.489(a)	
10. Section 108 Loan Allowance 24 CFR 570.705(c)	13. Total Awards to Units of General Local Government (Must equal <i>Total Awards</i> in REQUIRED table on page 2.)
11. Total Adjustments (Sum of Lines 8, 9 and 10)	
15. Date of Last Award (Most recent award from REQUIRED table on page 2)	14. Percent Awarded (Line 13 divided by Line 12 multiplied by 100%.)
By signing this form, I certify that the statements herein are true, complete and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001).	
Authorized Representative	
First Name	Prefix
Middle Name	Suffix
Last Name	Telephone Number
Title	Email
Signature of Authorized Representative	Date Signed

