

**Office of Lt. Governor
Department of Culture, Recreation & Tourism
Funding Agreement Checklist**

Agency/Program: DCRT/OCD/Division of Historic Preservation/Main Street

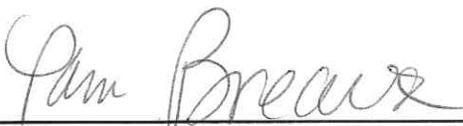
Recipient: City of Covington
317 North Jefferson Avenue
Covington, LA 70733

- Indicate:**
- Cooperative Endeavor
 - Professional Services Contract
 - Personal Services Contract
 - Consulting Services Contract
 - Social Services Contract
 - Grant: Indicate Specific Program – HPF Federal Funds
 - Line Item Appropriation
 - Letter of Agreement

- | Yes | No | |
|-------------------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the agreement include budget worksheet? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the agreement include anticipated uses? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the agreement include estimated duration of the project? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the agreement include goals, objectives, and measures of performance? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the agreement indicate requirement of written progress report every six (6) months? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the agreement notify the recipient of Louisiana Audit Law (R.S.24:513)? (See attached schedule) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Has the comprehensive budget been approved by the appointing authority? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Has the comprehensive budget been properly transmitted to the Louisiana Legislative Auditor? |

Signatures: 
Contract Monitor

7/16/12
Date


Appointing Authority

7-18-12
Date

**ATTACHMENT B
11-HP-10**

**CITY OF COVINGTON
CERTIFIED LOCAL GOVERNMENT PROGRAM
DEVELOPMENT OF HISTORIC
DISTRICT DESIGN GUIDELINES
BUDGET**

July 1, 2011– June 30, 2012

BUDGET CATEGORIES	GRANT AWARD	MATCH	TOTAL
Consultant Fees	5,000.00	5,000.00	10,000.00
TOTALS	5,000.00	5,000.00	10,000.00

FEDERAL GRANT AMOUNT	\$5,000
IN-KIND & CASH MATCH	\$5,000
TOTAL PROJECT COST	\$10,000

Travel will be reimbursed in accordance with state travel regulations, PPM-49 Revised.