

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

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

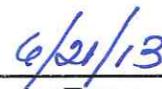
**Recipient: Town of Columbia  
P. O. Box 10  
Columbia, LA 71418**

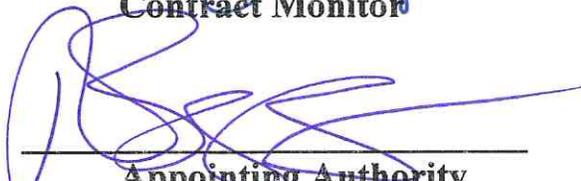
- Indicate:**
- Cooperative Endeavor
  - Professional Services Contract
  - Personal Services Contract
  - Consulting Services Contract
  - Social Services Contract
  - Grant: Indicate Specific Program – Federal NPS HPF
  - Line Item Appropriation
  - Letter of Agreement

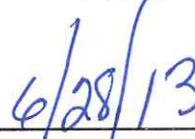
- | <b>Yes</b>                          | <b>No</b>                |  |
|-------------------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the agreement include budget worksheet?   |
| <input checked="" type="checkbox"/> | <input 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 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**

  
\_\_\_\_\_  
**Date**

  
\_\_\_\_\_  
**Appointing Authority**

  
\_\_\_\_\_  
**Date**

TOWN OF COLUMBIA  
CERTIFIED LOCAL GOVERNMENT PROGRAM  
TRAINING & EDUCATIONAL WORKSHOP

BUDGET

January 1, 2013 – June 30, 2013

BUDGET CATEGORIES	GRANT AWARD	CASH MATCH	TOTAL
Speakers Fees	1,775.00		1,775.00
Food for Training Session	100.00		100.00
<b>TOTAL</b>	<b>1,875.00</b>		<b>1,875.00</b>

FEDERAL GRANT AMOUNT	\$ 1,875.00
CASH MATCH	\$ 0.00
TOTAL PROJECT COST	\$ 1,875.00

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