

PRR Summary

Payment Reimbursement Request Form

Payment Reimbursement Request (PRR)

updated for EFR 3.25.20

Summary Information and Certification

| | | | |
|---|---|-------------------------------------|-------------|
| Grantee Name: | Hidalgo County Community Service Agency | | |
| | Grant Number: | FVA19-040 | |
| | Grant Amount: | \$300,000 | |
| Report Period: | <i>First day to last day of month</i> | March | 2020 |
| Budget Category | Award Amount | Requested Amount This Action | |
| Salaries | \$0 | \$ | - |
| Fringe Benefits | \$0 | \$ | - |
| Travel | \$500 | \$ | - |
| Supplies | \$320 | \$ | - |
| Client Services | \$345,000 | \$ | - |
| Other Direct | \$1,980 | \$ | - |
| Indirect | \$27,200 | \$ | - |
| Total | \$375,000 | \$ | - |
| Prepared By | | | |
| Type Name | Baleria Delgado | | |
| Title | Accounts Payable | | |
| Certification | | | |
| The Authorized Representative certifies that the the information contained in this report has been reviewed and it is true and correct by typing in their name. Only one of the listed below is required. | | | |
| Position | Name | Type Name | |
| Project Coordinator | Jaime Longoria | | |
| Finance Coordinantor | Cecilia Carrillo | | |
| Signature Authority | Guillermo Palacios | | |