SRF Disbursement Request Form																	
Participant Information																	
Name:	Name: Town of Bristol Municipal Sewage Works						SRF Loan Number: WW22532			2532001	L						
UEI #::	UEI #:: NF3SQSFKCC57 CCR I				CR Number: 870T8			Request Number: 7									
Mailing Address:																	
City:	Bristol				State	e:	IN		ZIP Cod	e:			46	5507-948	39		
Contact I	Person:		Mr. Mi	ke Yod	er			Contac	t Phone N	lumber	574-8	348-48	53				
Authorized Representative: Ms. Cathy Antonelli Authorized Representative Phone Number:						57	74-848-7	007									
If reques	If requesting reimbursement to the Participant by wire transfer please provide the following information:																
Bank Nar	Bank Name: Bank Routing Number:																
Account	Name:							Account	Number	:							
Loan Inf	formatior	ı															
Description of work for which claim is being SRF Bond Counsel made (services, fees, type of work, etc.):																	
Is any pa	rt of this c	laim funded	by an alt	ternate	funding	sour	ce?									YES	NO 🛛
If yes, ple	ease ident	ify the sourc	e and am	nount d	of the cla	im fu	nded by th	ne alterna	ate source	e (OCRA	, SAP, Local					\$	
Is any pa	rt of this c	laim funded	by the Ir	ndiana	Brownfie	elds P	rogram?									YES	NO 🛛
Has the F	Participant	paid the re	quest and	d is nov	w seeking	g rein	nbursemer	nt?								YES	NO 🛛
Is any pa	rt of this c	laim a result	t of a cha	nge or	der? If ye	es, pl	ease attacl	n the SRF	change o	rder ap	oroval letter	.				YES	NO 🛛
Are there	e Green Pr	oject Reserv	ve compo	nents i	involved	in th	is request?	If yes,	olease de	scribe:						YES	🛛 NO
Are there	e any Lead	Line replace	ement co	mpone	ents in th	is reo	quest?									YES	NO 🛛
		formation															
Original	Loan Amo	unt:													\$	28,265,000	
Total Am	nount of P	revious Disb	oursemen	nts:											\$	1,550,559	
Balance	Available	After this Di	sbursem	ent:											\$	26,710,700	
		actor for t	•												\$	3,741	
		equest a par	rtial or fin	nal rele	ase of re	taina	ige to the o	1								YES	NO 🛛
Contract	or Name:	Dento	ons Bingh	am Gre	enebaur	n LLF)	DUNS	#:	0	66892789						
Mailing a			Solutions	Cente	r	r			1								
City:	Chicago				State	e:	IL		ZIP Cod	e:				60677-3	3009		
	nformation							<u> </u>									
	Bank Name: PNC Bank, N.A. Bank Routing Number: 041000124																
Account Name: Dentons Bingham Greenebaum LLP Account Number: 4622345343																	
Retaina	ge Amou	nt for this	Request	:											\$	0.00	
· · ·		s that the re				<u> </u>											
Participant requests that the retainage amount be sent to the Participant via check to the mailing address listed above:																	
Participant requests that the retainage amount be sent to the following bank:																	
Bank Name: Bank Routing Number:																	
Account Name: Account Number:																	
		this Reque													\$	3,741	
The undersigned hereby certifies this request for disbursement is, to the best of my knowledge and belief, true and accurate and made in accordance with the conditions of the project agreement(s), that the certified payrolls received in connection with any enclosed construction invoices are in compliance with the Davis Bacon Act / US Department of Labor requirements of 29 CFR 5.5(a)(1), and are in compliance with SRF incentive programs.																	
	Authorized Representative Date:																
For Internal Use Only:																	



Dentons Bingham Greenebaum LLP 3913 Solutions Center Chicago, IL 60677-3009 1-800-436-3644 I.D. #61-1584266

Indiana Finance Authority SRF Programs One North Capital, Suite 900 Indianapolis, IN 46204 Attn: Director of Environmental Programs Account No.: 603317.100305 Invoice No.: 4577285 Invoice Date: May 14, 2024

TOWN OF BRISTOL WW

FOR PROFESSIONAL SERVICES RENDERED THROUGH MAY 10, 2024:

DATE	ATTORNEY/ PARALEGAL	DESCRIPTION	HOURS	AMOUNT
09/16/22	CEC	Call w/ Baker Tilly regarding financing;	0.20	83.00
10/03/22	CEC	Review and make edits to bond ordinance; draft FAA and send with bond ordinance comments; communications w/ M. Clary regarding the same;	2.50	1,037.50
10/03/22	MAC	Review Wastewater Ordinance	1.30	305.50
10/04/22	CEC	Review revised ordinance; sign-off;	0.30	124.50
01/25/24	CEC	Communications; work on matter;	0.20	106.00
02/01/24	CEC	Call with SRF regarding pool timing and financing schedule for participant;	0.30	159.00
02/01/24	MAC	Call with C. Cochran and B. Harkins re: plan of pool financing	0.20	83.00
02/27/24	CEC	Communications regarding schedules for pooled participants; work on matter;	0.30	159.00
02/28/24	MAC	Call with B. Harkins re: pool schedule	0.10	41.50
03/01/24	MAC	Draft deliverables timeline	0.50	207.50
03/04/24	CEC	Call w/ BC regarding financing; communications w/ SRF regarding the same;	0.30	159.00
03/05/24	CEC	Review deliverables e-mail; communications w/ M. Clary regarding the same;	0.30	159.00
03/05/24	MAC	Correspond with working group re: deliverables timeline and review of ordinances	0.30	124.50
03/22/24	MAC	Review correspondence re: proposed amortization schedule	0.20	83.00
03/25/24	CEC	Review amortization schedule and bond ordinance; communications regarding the same;	0.30	184.50
03/25/24	MAC	Correspond re: adoption of amended ordinance	0.10	41.50

Dentons Bin	gham Greeneba	um LLP	Invoice No.:	4577285	
Indiana Fina 603317.1003	nce Authority 305		Invoice Date: Page	May 14, 202 2	
DATE	ATTORNEY/ PARALEGAL	DESCRIPTION		HOURS	AMOUNT
03/27/24	CEC	Communications regarding borrower an	d open items;	0.30	184.50
03/29/24	MAC	Review Amendment to Bond Ordinance diligence questions	; draft due	0.50	207.50
04/01/24	MAC	Correspond with C. Cochran re: revision Amendment and due diligence question		0.20	83.00
04/02/24	MAC	Review revised Amendment; correspond Amendment	d re: sign off on	0.30	124.50
04/10/24	MAC	Review responses to due diligence ques	tions	0.20	83.00
FEES FOR PROFESSIONAL SERVICES RENDERED					3,740.50
INVOICE TOTA	<u>\$</u>	3,740.50			

SUMMARY OF PROFESSIONAL SERVICES

ATTORNEY/PARALEGAL	HOURS	RATE	AMOUNT
Cullen E. Cochran	0.60	615.00	369.00
Cullen E. Cochran	1.40	530.00	742.00
Cullen E. Cochran	3.00	415.00	1,245.00
Madalyn Anna Clary	2.60	415.00	1,079.00
Madalyn Anna Clary	1.30	235.00	305.50
	8.90		3,740.50



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Indiana Finance Authority SRF Programs One North Capital, Suite 900 Indianapolis, IN 46204 Attn: Director of Environmental Programs

TOWN OF BRISTOL WW

REMITTANCE PAGE

INVOICE TOTAL (USD)

Account No.: 603317.100305 Invoice No.: 4577285 Invoice Date: May 14, 2024

<u>\$ 3,740.50</u>

PAYMENT IS DUE WITHIN 30 DAYS OF THE DATE OF THIS INVOICE.

PLEASE RETURN THIS COPY WITH YOUR PAYMENT.



Dentons Bingham Greenebaum LLP 3913 Solutions Center Chicago, IL 60677-3009 1-800-436-3644 I.D. #61-1584266

Payments by check should be sent in U.S. Dollars to: Dentons Bingham Greenebaum LLP 3913 Solutions Center Chicago, IL 60677-3009

OR

Payment by wire transfer/ACH should be sent in U.S. Dollars to:

Bank Name: PNC Bank, N.A. 249 Fifth Avenue Pittsburgh, PA 15222 Account Name: Dentons Bingham Greenebaum LLP Account Number: 4622345343 ABA/Routing #: Wire Transfers 041000124 ACH Transfers 071921891 Swift Code for International Wires: PNCCUS33

PAYMENT IS DUE WITHIN 30 DAYS OF THE DATE OF THIS INVOICE.