			COMPLETE VENDOR INVOICE FOR REIMBURSEMENT ATTACH COPIES OF SUPPORTING DOCUMENTATION SIGN AND DATE BELOW BEFORE SUBMITTING TO DNRC FOR REIMBURSEMENT			
VENDOR'S NAME AND ADDRESS City of Sidney 115 2nd St SE Sidney, MT 59270			DNRC-CARDD PO Box 201601 Helena, MT 59620-1601			
Grant Agreement # AC-22-0158			Project Name Anderson Subdivision Drainage			
DNRC Grant Ma		Shawna Swanz	Claim Number	Q1 2024		
QUANTITY	TY DESCRIPTION OF GOODS DELIVERED OR SERVICES RENDERED				AMOUNT	
	Vendor 1 Morrison-Maierle, Inc	Invoice Number 234468	Dates of Service 12/1/2023	Task Description Grant Admin Final Design	\$ \$	403.50 4,651.28
	1 Morrison-Maierle, Inc	243231	2/2/2024	Grant Admin	\$	737.25
	1 Morrison-Maierle, Inc	243316	3/1/2024	Grant Admin	\$	233.00
				GRAND TOTAL	\$	6,025.03
	STATE USE ONLY APPROVED FOR PAYM	ENT	I certify that this invoice has not been received.	e is correct in all respe	ects and tha	t payment

STATE USE ONLY		I certify that this involce is correct in all respects and that payment		
AF	PROVED FOR PAYMENT	has not been received.		
		Vendor Name		
		(Authroized Person)		
DNRC Authorized		Date Processed		
Signature				
Date		Vendor's Signature		
Date		Title		