

STATE OF MONTANA VENDOR INVOICE		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-22-0159		Project Name Sidney Phase III Water		
DNRC Grant Manager Shawna Swanz		Claim Number		
QUANTITY	DESCRIPTION OF GOODS DELIVERED OR SERVICES RENDERED			AMOUNT
	Vendor	Invoice Number	Dates of Service	Task Description
	COP Construction	Pay App 2	4/29/23-5/26/23	Water Main Construction
	1% MT Gross Receipts Tax			
				\$ 224,347.07
				\$ 2,266.13
GRAND TOTAL				\$226,613.20

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