

Mobility Management Invoice Capital Reimbursement Invoice

Grantee: Hocking Athens Perry Community Action- Mobility Management

Project: PNP-0005-003-032

Contract Amount: \$ 60,000.00

Federal Grant FTA Specialized Transportation Program

Date Submitted: 4/6/2011

Invoice Sequence Number: 4 (Each project begins with Sequence Number 1)

Period Covered: 10/01/2010 to 12/31/2010

FTA Code	Description	Total	Federal	Local	Complete (Y/N)
11.7L.00	Capital for Mobility Management Activities			\$0	Y

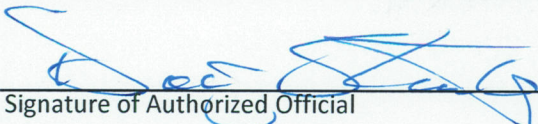
Account Code	Expense Description	Quarterly Expenses	Year To Date Expenses
501	Labor	\$11,564	\$35,858
502	Fringe Benefits	\$4,654	\$15,085
503	Purchased Services		
	Advertising Agency	\$3,449	\$4,625
	Custodial Service		
	Other	\$0	\$398
504	Office Supplies (for Mobility Manager only)	\$109	\$2,301
505	Utilities	\$489	\$515
506	Casualty & Liability Costs - Expenses for Bonding for Mobility Manager & Board Members		
509	Miscellaneous:		
	Dues & Subscriptions		
	Travel & Meetings	\$454	\$1,659
	Program Supplies	\$166	\$194
	Marketing		
	Other indirect	\$2,567	\$5,521
512	Lease of Office Space for Mobility Manager	\$926	\$1,146
	Total Mobility Management Expenses	\$24,378	\$67,302

(1) Total Eligible Expenses.....	Current Quarter	Year To Date
(2) Eligible Ohio Coordination Reimbursement (80% of Line 1).....	\$24,378	\$67,302
	\$19,502	\$53,842


Reconciliation Statement

(A) Contract Beginning Balance (Line C from previous invoice.).....	\$28,029
(B) Funds Requested.....	\$19,502
(C) Remaining Contract Balance.....	\$8,527

I hereby certify that the above information is correct to the best of my knowledge. Copies of the documentation for project expenditures are being retained in the project files.


4/6/2011
 Signature of Authorized Official Date

Please sign below only after all grant expenditures have been completed.


4/4/2011
 Signature of Authorized Official Date