

Competitive Grant Invoice

LEAD REMEDIATION IN DRINKING WATER IN SCHOOLS AND CHILD CARE SETTINGS

Grantee Information

Application/Organization _____

Address _____

Grant Contact _____

Phone _____ Email _____

Work Items and Expenditure Description – use an additional page if necessary	Total Project Costs
	\$
	\$
	\$
	\$
	\$
Total Project Costs	\$
Amount to be reimbursed	\$

Accountability and Reporting Requirements

Respond to each on separate sheet of paper. Check each term to verify completion.

An organization that receives a Lead Remediation in Drinking Water in Schools and Child Care Settings Grant must report the results of each work item that is funded by providing all of the following information:

- the results of performing the work that is described in the grant application.
- the total amount of grant funds that were expended to perform each work item.
- a summary of the costs that are attributed to performing each work item.
- a copy of any article, announcement, or social media post published by the facility acknowledging the MDH funding and stating its impact on people who benefit from the remediation grant.
- lead test following remediation activity (before putting fixture into service).

COMPETITIVE GRANT INVOICE

Disclaimer and Signature

I declare that no part of this claim has been previously billed to MDH, and that the Total Expenditures reflect only charges related to the lead remediation grant project. I also declare that the data on this document is correct and all transactions that support this claim were made in accordance with all applicable State statutes and regulations.

Signature _____ Date _____

Minnesota Department of Health | Drinking Water Protection | HEALTH.WIIN_Grant@state.mn.us | www.health.state.mn.us

11/2023 | To obtain this information in a different format, call: 651-201-4700.