**Company Name**

NORTH CAROLINA DEPARTMENT OF TRANSPORTATION, RAIL DIVISION
REQUEST FOR REIMBURSEMENT
SHORTLINE INFRASTRUCTURE ASSISTANCE PROGRAM

| | | |
|---|---|---|
| **Project Sponsor:** | | |
| **WBS Element:** | **Rail Fiscal Number:** | |
| **Invoice Number:** | **Prepared by:** | **Title:** |
| **Telephone:** | **Fax:** | |
| **Period Covered From:** | **To:** | **Date Prepared:** |

| Description | Approved Budget | Expenditures This Period | Previous Expenditures | Total Expenditures | Remaining Balance |
|---|---|---|---|---|---|
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| **Total** | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |

| | | |
|---|---|---|
| **TOTAL COST THIS PERIOD** | $ 0.00 | **Maximum Grant Amount:** |
| **RAILROAD SHARE ( %)** | $ 0.00 | |
| **STATE SHARE ( %)** | $ 0.00 | **Grant funds remaining (not including this invoice): $ 0.00** |
| **AMOUNT DUE THIS INVOICE** | **$ 0.00** | |
| **PERCENT OF PROJECT COMPLETED** | % | ☐ **Final Invoice?** |

**CERTIFICATION OF COMPLIANCE**

*SIGNATORY SHOWN BELOW CERTIFIES THAT THE PROJECT TRACK HAS BEEN APPROVED BY THE RAILROAD, BEEN USED IN REVENUE SERVICE, AND GRANTEE HAS COMPLIED WITH ALL APPLICABLE FEDERAL, STATE, AND LOCAL POLICIES, RULES AND REGULATIONS, AND STATUTES INCLUDING COMPLIANCE WITH APPLICABLE ENVIRONMENTAL POLICIES, RULES, REGULATIONS, AND STATUTES.*

**ATTACH SUPPORTING DOCUMENTATION AND PROOF OF PAYMENT FOR THE ABOVE EXPENSES.** *Examples: contractor invoices and copies of cancelled checks.*

| | |
|---|---|
| **SIGNATURE:** | **PRINT NAME:** |
| **MAKE CHECK PAYABLE TO:** | |