



8/04/2025

City of Crete, NE
 Attn: Tom Ourada
 243 East 13th Street
 Crete, NE 68333

RE: City of Crete #24DTR001 Payment Request #2

Dear Mr. Ourada:

Enclosed is Drawdown #2 for the Downtown Revitalization Phase IV project. After reviewing the materials, please have Mayor Bauer and yourself sign the Drawdown (DD) as noted and retain the wet-ink original in your project file. Please have all documents signed in **"BLUE INK"**.

After the drawdown documents have been submitted and approved by the Department of Economic Development (DED), the City can expect an automatic transfer from DED within at least 10-30 business days that will be deposited into the designated Community Development Block Grant (CDBG) account. Once received, please write the following check(s):

	TOTAL	CDBG	Match
Drawdown #2: The following #21A bills have not yet been paid.			
SENDD GA Invoice(s): 3 - 7 Activity Code #21A	\$5,816.54	\$5,816.54	\$0.00
Commercial Rehabilitation: Activity Code #14E	\$0.00	\$0.00	\$0.00
SENDD CM Invoice(s): 1 - 2 Activity Code #03K	\$280.00	\$280.00	\$0.00
Totals:	\$6,096.54	\$6,096.54	\$0.00

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7407 O St | Lincoln, NE 68510



402-475-2560



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According to the above figures, the City should make the following payments:

Activity Code: #21A & #03K

Amount: \$6,096.54

To: Southeast Nebraska Development District

Address: 7407 O Street, Lincoln, NE 68510

NOTES:

1. Upon completed processing at NDED/State, the CDBG funds will be electronically deposited in the identified City's account. **Please disburse NDED funds within five days;** otherwise, it may result in a finding during monitoring.
2. If you make a payment with local funds before the CDBG funds are electronically deposited in your City account, that will be "reimbursement" and those funds are no longer considered "federal" and may be transferred to local accounts as you wish.
3. Please remember to keep copies of the checks made as payment for CDBG activities and keep copies of the bank statements showing deposits of CDBG funds and clearance of checks distributed. **Once the payments have been distributed, please send the Grant Administrator copies of canceled checks and bank statements to upload as source documentation in Amplifund.**

Please feel free to give me a call at (402) 475-2560 if you have any questions.

Sincerely,

James Owens

James Owens

Senior Community Development Specialist

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7407 O St | Lincoln, NE 68510



402-475-2560



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**Request for Funds (Drawdown/Payment Request)
Community Development Block Grant Program
Nebraska Department of Economic Development**

Name of Subrecipient (Local Unit of Government) City of Crete		Mailing Address 243 East 13th Street		City Crete	State NE	ZIP 68333
CDBG Agreement Number 24DTR001	Federal Identification Number 47-6006154	DUNS Number FC3ZUL6J8JC3	UEI Number 12/02/2025	Number sequence order of funds 2	Final Drawdown	DED Program Representative Gina Doose

Part I – STATUS OF FUNDS

1. CDBG Funds Received to Date	\$ 4,270.00
2. Add: Program Income Received to Date (exclude RLF)	\$ 0.00
3. Subtotal	\$ 4,270.00
4. Less: Federal Funds Disbursed To Date (Must Agree To Total Of Part II, Line 3)	\$ 4,270.00
5. Total: Federal Funds On Hand (Must Agree To Part II, Line 6)	

Part II – CASH REQUIREMENTS (Identify all activities listed in the CDBG Agreement, even if funds are not being requested.)

Activity/Budget Category	21A General Administration	14E Construction Management	14E Commercial Rehabilitation	TOTAL
1. Total Cash Requirements To Date	\$ 10,086.54	\$ 280.00	\$ 0.00	\$ 10,366.54
2. Less: Local Funds Disbursed (includes RLF) (exclude Program Income)			\$ 0.00	
3. Less: Federal Funds Disbursed (include Program Income) Total Must Agree To Part I, Line 4 (exclude RLF)	\$ 4,270.00	\$ 0.00	\$ 0.00	\$ 4,270.00
4. Total Current Cash Requirements	\$ 5,816.54	\$ 280.00		\$ 6,096.54
5. Less: Unpaid Previous Request.				
6. Less: Federal Funds On Hand (Must Agree To Part I, Line 5)				
7. Net Amount of Federal Funds Requested				\$ 6,096.54

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812). I also certify that the amount of the request for federal funds is not in excess of current needs.

Signature of Authorized Official (Mayor/Board Chairman)	Typed Name of Authorized Official	Date
Signature of Authorized Official (Clerk/Treasurer)	Typed Name of Authorized Official	Date
Person Preparing Request for CDBG Funds Form Name: James Owens	Organization: SEND D	Telephone Number: 402-475-2560
		Email: jowens@sendd.org

PLEASE REFER TO INSTRUCTIONS FOR ADDITIONAL GUIDANCE. INCOMPLETE OR INCORRECT FORMS WILL NOT BE PROCESSED

***To update calculations, either tab two (2) fields or click on a different field with your mouse.

Instructions : CDBG Request for Funds (Drawdown/Payment Request)

If a subrecipient has more than one CDBG agreement, funds requested must reflect actual eligible cost incurred. Claim exact amounts on each reimbursement check addition and subtraction. Funds requested must reflect actual eligible cost incurred. Claim exact amounts on each reimbursement down to the penny on the reimbursement request. Requests for funds are to be submitted only as funds are needed for immediate disbursement. Refer to the CDBG Administration Manual, Chapter 12 for more information.

With the exception of the final draw, or requested by DED, there is a **minimum to be drawn** as described below:

- **\$500:** Request for general administration expenditures only.
- **\$1,500:** Request amount for general administration and project expenditures
- **\$1,500:** Request amount for project expenditures only

Identifying Information

The top portion of the Request for CDBG Funds will be completed with the appropriate identifying information.

- **Name of Subrecipient:** Input name of local unit of government who entered into the Agreement with DED.
- **Mailing Address:** Input the mailing address of the subrecipient
- **CDBG Agreement Number:** the number assigned to the contractual agreement between DED and the subrecipient.
- **Federal Identification Number:** Input the subrecipient's federal identification number.
- **DUNS Number:** Input the subrecipient's DUNS Number. If submitting a request after April 4, 2022, this can be left blank.
- **UEI Number:** Input the Unique Entity Identifier number for the subrecipient. This can be located on sam.gov.
- **SAM Expiration Date:** System for Awards Management (SAM) registrant expiration date to receive payment of federal funds. All entities receiving federal funds are required to have an active status within SAM.
- **Number Sequence Order of Funds:** Each request must be sequentially numbered by the subrecipient. Number each request for funds in sequence based on the signature date by the authorized officials.
- **Final Drawdown:** Input "yes" if this is the last request for CDBG; Input "no" if this is not the last request for CDBG funds.
- **DED Program Representative:** Identify the DED Representative who is the main contact associated with the CDBG Agreement.

PART II: Cash Requirements

Part II provides information on the subrecipient's cash requirements. In the row labeled "Activity/Budget Category", identify all the activity code and activity name (as shown in the Sources and Uses Section of the CDBG agreement) above each column. Be sure to complete Part II for all approved activities even if funds are not requested for all activities. Enter the total of all cash requirements to date for each activity/budget category. This amount should be equal to all expenditures paid to date plus cash needed to meet immediate cash obligations.

Line 2 Subtract all local matching or other funds disbursed. (Include program income designated for revolving loan funds from prior CDBG agreements for same activities.) This will include local funds already expended and local funds, which will be expended to meet Line 1.

Line 3 Subtract federal funds applied (include program income). The total of this row must equal the amount shown on Part I, Line 4.

Line 4 Subtotal by subtracting Lines 2 and 3 from Line 1. This amount should be equal the amount of federal funds needed for immediate cash obligations.

Line 5 Subtract the amount of any previous Request for CDBG funds, which has not yet been received.

Line 6 Subtract the amount of federal funds on hand. This amount must equal the amount on Part I, Line 5.

Line 7 The net amount of federal funds requested is determined by subtracting Lines 5 and 6 from Line 4. This should be the amount of CDBG funds needed (when added to CDBG funds on hand and CDBG funds requested but not yet received) to meet immediate cash obligations.

Signatures

Signatures of both the Mayor/Board Chairperson and the Clerk/Treasurer are necessary to process the Request for CDBG Funds. Signatures must agree to authorization Community Development Block Grant Funds. After signing and dating the Request for CDBG Funds, the subrecipient should retain a copy of the form and upload within AmplifiFund.

PART I: Status of Funds

Part I of the form will provide the status of CDBG funds for the related CDBG agreement.

Line 1 List all CDBG funds received to date.

Line 2 Add program income received from activities related to the CDBG agreement (exclude program income designated for revolving loan funds).

Line 3 Subtotal Lines 1 and 2.

Line 4 Subtract all disbursements of CDBG funds to date (MUST agree to total of Part II, Line 3).

Line 5 Federal funds on hand should reflect CDBG funds which have not been disbursed.

INCOMPLETE OR INCORRECT FORMS WILL NOT BE PROCESSED.