

DEPARTMENT OF DESIGN AND CONSTRUCTION
DISCRETIONARY CAPITAL AWARD
PAYMENT REQUISITION: FORM C

Title of Award Agreement: _____ **Payment No.** _____

Award Registration No. _____ **FMS ID:** _____

(Organization to complete the header, Lines 1-6, and the Organization's Certificate)

| | | |
|---|----|--|
| 1. ORIGINAL FUNDING AGREEMENT AWARD AMOUNT | \$ | |
| 2. ANY NET CHANGE | \$ | |
| 3. AWARD AGREEMENT AMOUNT TO DATE (1 + or - 2) | \$ | |
| 4. TOTAL COMPLETED (Column G from Payment Requisition Form A*) | \$ | |
| *Total Completed amount cannot exceed the Award Agreement Amount from Line 3. | | |
| 5. LESS TOTAL OF ALL PREVIOUSLY APPROVED PAYMENT REQUISITIONS | \$ | |
| 6. CURRENT PAYMENT DUE | \$ | |
| 7. AMOUNT WITHHELD BY RE/PM | \$ | |
| REASONS: | | |
| 8. PAYMENT DUE | \$ | |
| 9. AMOUNT WITHHELD BY EAO | \$ | |
| REASONS: | | |
| 10. PAYMENT AMOUNT APPROVED BY EAO | \$ | |
| 11. AMOUNT WITHHELD BY CFO | \$ | |
| REASONS: | | |
| 12. PAYMENT AMOUNT APPROVED BY CFO | \$ | |

ORGANIZATION'S CERTIFICATE

The undersigned Organization certifies that all items, units, quantities and material shown on this requisition is correct; that all work has been performed and material supplied in full accordance with the terms and conditions of the Funding Agreement between the Department of Design and Construction of the City of New York and (Organization) dated _____, 20____, and all authorized changes thereto; that all Funding Agreement reports are attached; and that the above is a true and correct statement of the Funding Agreement account up to and including the last day of the period covered by this requisition and that no part of the "Current Payment Due" has been received.

Signature _____ Federal taxpayer I.D. # _____
 Name (Print) _____ Date _____
 Title (Print) _____

PROJECT MANAGER'S CERTIFICATE

I certify that I have verified this requisition and that to the best of my knowledge and belief it is a true and correct statement of the materials supplied by the Organization and that all work and material included in this estimate has been inspected by me or my duly authorized assistants and has been found to comply with the terms and conditions of the corresponding Funding Agreement and authorized changes thereto.

Signature _____ Date: _____
 Name (Print) _____
 Title (Print) _____