Mississippi Home Corporation Request for Cash

Program: Section A: Gene	HOME Homeowner Rehabilatation	on Program	Section			
Recipient	Madison County Board Of S	Grant No.	Project No.			
Mailing Address	Post Office Box 608					
	125 West North Peace Street		Continue Donaton		Request No.	
Street Address City, State Zip	Canton, MS 39046		From	Services Rendered	То	5
	601-855-5500		From	T	10	MHC Staff Initials
Telephone No.	001-033-3300		1-Apr-19	Thru	30-Apr-19	
Section C: Requ	uest Per Activity				du-Api-19	
	Activity Description	Budget Amount	Total Received to Date	This Request	Remaining Balance	Activity Numbers
1	Application Fee	\$5,000.00	\$5,000.00	\$0.00	\$0.00	
2	Bertha Luckett Matlock	\$188,850.00	\$2,250.00	\$800.00	\$185,800.00	
3	Mary Black	\$44,450.00	\$1,450.00	\$800.00	\$42,200.00	
4	Mary M. Austin	\$44,450.00	\$1,450.00	\$800.00	\$42,200.00	
5	Rose Zettera Williams	\$44,450.00	\$1,450.00	\$800.00	\$42,200.00	
6	Willie Ann Johnson	\$44,450.00	\$1,450.00	\$800.00	\$42,200.00	
7	Paulette Wales	\$44,450.00	\$1,450.00	\$800.00	\$43,000.00	-
8	Margie Brooks	\$44,450.00	\$1,450.00	\$800.00	\$42,200.00	-
9	Wallace Ross	\$44,450.00	\$1,450.00		\$43,000.00	·
10		\$0.00	\$0.00	\$0.00	\$0.00	
	Total:	\$505,000.00	\$10,600.00	\$5,600.00	\$482,800.00	
under any oth grant; (c) the I Hereby Certif requirements a belief that the conditions of	rtify That (a) the services covered her contract agreement or grant; amount requested herein does not be the feet of the services and regulations. I certify that this requested report is true, complete, and accut the Federal award. I am aware that e penalties for fraud, false stateme	(b) the amount reque ot exceed the total fu is rendered have been of lest does not include an urate, and the expending at any false, fictitious,	sted will be expended for a unds obligated by contract; delivered and/or performed in g by advances or funds for future tures, disbursements and c or fraudulent information, o	and (d) the funds are good order within the time e obligations. By signin ash receipts are for the or the omission of any	nditures under the terms requested for only imme the listed above and are in cong this report, I certify to the purposes and objective material fact, may subject	s of the contract agreement or ediate disbursements. compliance with all statutory the best of my knowledge and tes set forth in the terms and tet me to criminal, civil or

ls this your final	request for cash on this contract?			YES	х	NO
	Circulate of A. the dead Official				James Curtis Smith	4/8/2019
	Signature of Authorized Officia	11	Date Signed		Prepared By	Date Prepared
	Trey Baxter, President				601-214-5966	
	Typed Name and Title of Authoriz	zed Official			Preparer's Telephor	ne No.
	APPROVED BY:S	To be o	completed by MHC Auth		ATE:	
	AUTHORIZED BY:	ignature, Authorized Mi	0009990000	DA	ATE:	
	IDIS APPROVED BY:			DA	ATE:	
		ignature, Authorized Mi	HC Representative			
IDIS Voucher Numbe	Vendor Number	Issue/Series	Fund/Sub-Fund	Servicer		

Page 1

Mississippi Home Corporation Consolidated Support Sheet

Program:

Homeowner Rehabilitation

Recipient

dison County Board Of Supervisors

Request for Cash Number:

5

Contract Number:

1228-M16-SG-280-045

Total Amount Requested:

\$

5,600.00

IDIS#	Line Items	Vendor	Invoice #	Total Invoice	Amount of This Request	Match	Amount Budgeted	Total Received to Date	Balance
	Application Fee	Sunbelt R&D	HOME 1601				\$5,000.00	\$5,000.00	\$0.00
	Total Administration			\$0.00	\$0.00	\$0.00	\$5,000.00	\$5,000.00	\$0.00
Home #1	Bertha Luckett Matlock						\$188,850.00	\$2,250.00	\$186,600.00
		AEC	2539	\$800.00	\$800.00				\$800.00
									\$0.00
	W. I. C. S.								\$0.00
Home #1				\$800.00	\$800.00	\$0.00	\$188,850.00	\$3,050.00	\$185,800.00
Home #2	Mary Black						\$44,450.00	\$1,450.00	\$43,000.00
		AEC	2539	\$800.00	\$800.00				\$800.00
									\$0.00
-						The property of the section of the section of			
Home #2				000.00	6000.00	00.00	044.450.00	20.050.00	\$0.00
Treat Addition 1970	11 11 11 11			\$800.00	\$800.00	\$0.00	\$44,450.00	\$2,250.00	\$42,200.00
Home #3	Mary M. Austin						\$44,450.00	\$1,450.00	\$43,000.00
		AEC	2539	\$800.00	\$800.00				\$800.00
									\$0.00
									\$0.00
Home #3				\$800.00	\$800.00	\$0.00	\$44,450.00	\$2,250.00	\$42,200.00
Home #4	Rose Zettera Williams						\$44,450.00	\$1,450.00	\$43,000.00
		AEC	2539	\$800.00	\$800.00				\$800.00
									\$0.00
									\$0.00
Home #4				\$800.00	\$800.00	\$0.00	\$44,450.00	\$2,250.00	\$42,200.00
Home #5	Willie Ann Johnson						\$44,450.00	\$1,450.00	\$43,000.00
		AEC	2539	\$800.00	\$800.00				\$800.00
									\$0.00
									\$0.00
Home #5	The state of the s			\$800.00	\$800.00	\$0.00	\$44,450.00	\$2,250.00	\$42,200.00
								\$13,050.00	
				Bright metocols				THE RESERVE THE PROPERTY OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO I	

I Hereby Certify That (a) the services covered by this request have not been received from the Federal / State Government or expended for such services under any other contract agreement or grant; (b) the amount requested will be expended for allowable costs / expenditures under the terms of the contract agreement or grant; (c) the amount requested herein does not exceed the total funds obligated by contract; and (d) the funds are requested for only immediate disbursements.

I Hereby Certify That the goods sold and/or services rendered have been delivered and/or performed in good order within the time listed above and are in compliance with all statutory requirements and regulations. I certify that this request does not include any advances or funds for future obligations.

		James Curtis Smith		
Signature of Authorized Official	Date Signed	Prepared By		
Trey Baxter, President		601-214-5966		
Typed Name and Title of Authorized Official		Preparer's Telephone No.		

Page 2

Mississippi Home Corporation Consolidated Support Sheet

Program:

Homeowner Rebabilitation

Recipient

dison County Board Of Supervisors

Request for Cash Number:

.

Contract Number:

1228-M16-SG-280-045

Total Amount Requested:

\$800.00

IDIS#	Line Items	Vendor	Invoice #	Total Invoice	Amount of This Request	Match	Amount Budgeted	Total Received to Date	Balance
Home #6	Paulette Wales						\$44,450.00	\$1,450.00	\$43,000.00
		AEC	2539	\$800.00	\$800.00				\$800.00
									\$0.00
									\$0.00
Home #6				\$800.00	\$800.00	\$0.00	\$44,450.00	\$1,450.00	\$43,000.00
Home #7	Margie Brooks						\$44,450.00	\$1,450.00	\$43,000.00
		AEC	2539	\$800.00	\$800.00				\$800.00
									\$0.00
									\$0.00
Home #7				\$800.00	\$800.00	\$0.00	\$44,450.00	\$2,250.00	\$42,200.00
Home #8	Wallace Ross						\$44,450.00	\$1,450.00	\$43,000.00
					1				\$0.00
									\$0.00
Home #8				\$0.00	\$0.00	\$0.00	\$44,450.00	\$1,450.00	\$43,000.00
Home #9									\$0.00
									\$0.00
									\$0.00
									\$0.00
				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
							TOT REQ TO DTE	\$17,400.00	
		GRAND TOTAL		65 COO OO	65.000.00	60.00	0505 000 00	000,000,00	0.400.000.00
	Cardiana Dandanad - Dania			\$5,600.00	\$5,600.00	\$0.00	\$505,000.00	\$23,000.00	\$482,800.00
	Services Rendered - Begin	ining:			Thru				
		\$23,000.00	Plus (+)		\$0.00	Equals (=)	\$23,000.00		
	Cumulative:	Program Expenditures		Matching Ex	penditures		Total Expenditures		
terms of the co	ntract agreement or grant; (c) the a	amount requested herein does not e	xceed the total funds	obligated by contract; and	(d) the funds are requested	for only immediate disburseme	ents.	ted will be expended for allowable co	
		Authorized Official		Date Signed		nmes Curtis Smith Prepar	red By		
	Trey Baxter, President			60	1-214-5966				
	Typed Name and Title of A	uthorized Official		Preparer's Telephone No.					

Advanced Environmental Consultants, Inc.

Invoice

Fax: (601) 362-3967

775 North President Street

Jackson, MS 39202 Phone: (601) 362-1788

Date	Invoice #
4/5/2019	2539

Bill To	
Madison County Board of Supervisors 3137 South Liberty Street Canton, MS 39046	
·	

Ship To	
Madison County Board of Supervisors 3137 South Liberty Street Canton, MS 39046	

P.O. Number	Terms	Rep	Ship	Via	F.	O.B.	Project
AEC 065.18	Due on receipt	t DMG	4/5/2019	Electronic	Elec	etronic 201	6 HOME GRAN
Quantity Stem Code			Descript	ion		Price Each	Amount
1 4 1 4 1 4 1 4 1 4 1 5 1 5 1 5 1 5 1 5	Λ1	N, Canton, MS Asbestos Inspect MS 39046 Asbestos Inspect Canton, MS 390 Asbestos Inspect Carson, Canton Asbestos Inspect Canton, MS 390 Asbestos Inspect MS 39046 Asbestos Inspect MS 39046 LEAD INSPECT Lead Inspection Canton, MS 390 Lead Inspection MS 39046 Lead Inspection Canton, MS 390 Lead Inspection MS 39045 Lead Inspection MS 39045 Lead Inspection 39046	SPECTIONS: ction- Bertha Lucke 39046 ction-Mary M. Aust 046 ction-Rose Zettera V. MS 39046 ction-Willie Ann Jon 045 ction-Paulette Wales ction-Mary Brooks- trion-Mary Brooks- trion-Mary Brooks- TIONS: -Bertha Luckett Ma 046 -Mary Black-4255 -Mary M. Austin-9 -Rose Zettera Willia 046 -Willie Ann JonesPaulette Wales-14	tt Matlock-4406 Hi 255 Highway 43 N, in-955 Old Highwa Williams-147 Willia nes-149 Hargon Ro s-148 Tithelo Road 1980 Highway 16 H atlock-4406 Highwa Highway 43 N, Can 55 Old Highway 16 ams-147 William C 149 Hargon Road, 8 Tithelo Road, Can O Highway 16 E, Can	Canton, Ly 16, Ly 16, Lam Lad, Canton, Canton, Ly 43 N, Ly 44 N, Ly	400.00 400.00 400.00 400.00 400.00 400.00 400.00 400.00 400.00 400.00 400.00 400.00	400.0 400.0 400.0 400.0 400.0 400.0 400.0 400.0 400.0 400.0 400.0 400.0
						Total	\$5,600.00