



**Mississippi Home Corporation  
Consolidated Support Sheet**

Program: Homeowner Rehabilitation  
 Recipient: Madison County Board Of Supervisors  
 Request for Cash Number: 6

Contract Number: 1228-M16-SG-280-045  
 Total Amount Requested: \$ 39,562.50

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
	<b>Total Administration</b>			\$0.00	\$0.00	\$0.00	\$5,000.00	\$5,000.00	\$0.00
Home #1	Bertha Lockett Matlock						\$188,850.00	\$3,050.00	\$185,800.00
		Sunbelt R&D	1603	\$700.00	\$700.00				\$700.00
									\$0.00
									\$0.00
Home #1				\$700.00	\$700.00	\$0.00	\$188,850.00	\$3,750.00	\$185,100.00
Home #2	Mary Black						\$44,450.00	\$2,250.00	\$42,200.00
		Sunbelt R&D	1603	\$700.00	\$700.00				\$700.00
		Sunbelt R&D	1603	\$2,250.00	\$2,250.00				\$2,250.00
		Skyline Innovations LLC	1	\$16,225.00	\$16,225.00				\$0.00
Home #2				\$19,175.00	\$19,175.00	\$0.00	\$44,450.00	\$21,425.00	\$23,025.00
Home #3	Mary M. Austin						\$44,450.00	\$2,250.00	\$42,200.00
									\$0.00
									\$0.00
Home #3				\$0.00	\$0.00	\$0.00	\$44,450.00	\$2,250.00	\$42,200.00
Home #4	Rose Zettera Williams						\$44,450.00	\$2,250.00	\$42,200.00
		Sunbelt R&D	1603	\$700.00	\$700.00				\$700.00
		Sunbelt R&D	1603	\$2,250.00	\$2,250.00				\$2,250.00
		Skyline Innovations	1	\$15,337.50	\$15,337.50				\$0.00
Home #4				\$18,287.50	\$18,287.50	\$0.00	\$44,450.00	\$20,537.50	\$23,912.50
Home #5	Willie Ann Johnson						\$44,450.00	\$2,250.00	\$42,200.00
									\$0.00
									\$0.00
Home #5				\$0.00	\$0.00	\$0.00	\$44,450.00	\$2,250.00	\$42,200.00
								\$17,050.00	

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.

\_\_\_\_\_  
Signature of Authorized Official

\_\_\_\_\_  
Date Signed

James Curtis Smith  
Prepared By

Gerald Steen, President  
Typed Name and Title of Authorized Official

601-214-5966  
Preparer's Telephone No.

**Mississippi Home Corporation  
Consolidated Support Sheet**

Program: Homeowner Rehabilitation  
 Recipient: Madison County Board Of Supervisors  
 Request for Cash Number: 6

Contract Number: 1228-M16-SG-280-045  
 Total Amount Requested: \$39,562.50

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	\$2,250.00	\$42,200.00
		Sunbelt R&D	1603	\$700.00	\$700.00				\$700.00
									\$0.00
									\$0.00
Home #6				\$700.00	\$700.00	\$0.00	\$44,450.00	\$2,950.00	\$41,500.00
Home #7	Margie Brooks						\$44,450.00	\$2,250.00	\$42,200.00
		Sunbelt R&D	1603	\$700.00	\$700.00				\$700.00
									\$0.00
									\$0.00
Home #7				\$700.00	\$700.00	\$0.00	\$44,450.00	\$2,950.00	\$41,500.00
Home #8	Wallace Ross						\$44,450.00	\$1,450.00	\$43,000.00
									\$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
							<b>TOT REQ TO DTE</b>	\$23,000.00	
<b>GRAND TOTAL</b>				\$39,562.50	\$39,562.50	\$0.00	\$505,000.00	\$62,562.50	\$442,437.50

Services Rendered - Begin: 1-Jan-20 Thru: January 27, 2020

Cumulative: \$62,562.50 Plus (+) Matching Expenditures \$0.00 Equals (=) Total Expenditures \$62,562.50

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.

\_\_\_\_\_  
Signature of Authorized Official

\_\_\_\_\_  
Date Signed

James Curtis Smith  
Prepared By

Gerald Steen, President  
Typed Name and Title of Authorized Official

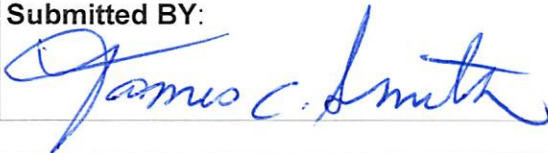
601-214-5966  
Preparer's Telephone No.

Sunbelt Research and Development  
 Consortium, Inc.  
 717 Thomas Lane  
 Madison, MS 39110  
 601-214-5966  
 Fax: 601-898-3761

SERVICE INVOICE

**SERVICE FOR:**  
 Project Administration

**Submitted BY:**



**BILL TO:**  
 Madison County Board of Supervisors  
 Post Office Box 608  
 Canton, MS 39046

**INVOICE NUMBER** HOME 1603  
**Source** 1228-M16-SG-280-045  
**TAX NUMBER** 64-0660259  
**JOB DESCRIPTION** Project Administration.]  
**DATE** [01/27/2020]

DATE	SERVICE DESCRIPTION	Amount	Rate	AMOUNT
01/27/2020	<b>HOME Project Notice To Proceed</b>			
	Bertha Luckett Matlock	700	1.00	700.00
	Mary Black	700	1.00	700.00
	Mary M. Austin			
	Rose Zettera Williams	700	1.00	700.00
	Willie Ann Johnson			
	Paulette Wales	700	1.00	700.00
	Margie Brooks	700	1.00	700.00
	Wallace Ross			
	<b>Construction</b>			
	Mary Black 50% Complete	2250	1.00	2250.00
	Rose Zettera Williams 50% Complete	2250	1.00	2250.00
				<b>\$8,000.00</b>
				<b>TOTAL DUE</b>

**MAKE CHECKS PAYABLE TO:**  
 Sunbelt Research and Development Consortium,  
 Inc.



# APPLICATION AND CERTIFICATION FOR PAYMENT

TO OWNER:

Mary Black  
4255 Highway 43 North  
Canton, MS 39046

FROM CONTRACTOR:

Skyline Innovations, Inc.  
115 Riley Drive  
Jackson, MS 39209

CONTRACT FOR:

PROJECT:

VIA ARCHITECT:

AIA DOCUMENT G702

PAGE ONE OF 2 PAGES

APPLICATION NO: 1

PERIOD TO: 1/27/2020

PROJECT NOS:

CONTRACT DATE:

Distribution to:


ARCHITECT  
CONTRACTOR

## CONTRACTOR'S APPLICATION FOR PAYMENT

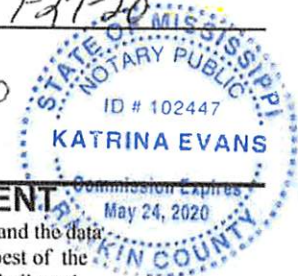
Application is made for payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Document G703, is attached.

1. ORIGINAL CONTRACT SUM	\$	32,450.00
2. Net change by Change Orders	\$	_____
3. CONTRACT SUM TO DATE (Line 1 + 2)	\$	32,450.00
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703)	\$	16,225.00
5. RETAINAGE:		
a. _____ % of Completed Work (Column D + E on G703)	\$	0.00
b. _____ % of Stored Material (Column F on G703)	\$	_____
Total Retainage (Lines 5a + 5b or Total in Column I of G703)	\$	0.00
6. TOTAL EARNED LESS RETAINAGE (Line 4 Less Line 5 Total)	\$	16,225.00
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)	\$	-
8. CURRENT PAYMENT DUE	\$	16,225.00
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)	\$	16,225.00

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR:

By: John Chitoff Date: 1-27-20  
 State of MS County of: Hinds  
 Subscribed and sworn to before me this 27th day of Jan 2020  
 Notary Public Katrina Evans  
 My Commission expires: May 24, 2020



## ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED ..... \$ 16,225.00

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and on the Continuation Sheet that are changed to conform with the amount certified.)

ARCHITECT: Project Admin  
 By: James Smith Date: 1/27/2020

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner		
Total approved this Month		
TOTALS	\$0.00	\$0.00
NET CHANGES by Change Order		\$0.00



# APPLICATION AND CERTIFICATION FOR PAYMENT

TO OWNER:  
 Zettera Williams  
 147 William Carson Road  
 Canton, MS 39046  
 FROM CONTRACTOR:  
 Skyline Innovations, Inc.  
 115 Riley Drive  
 Jackson, MS 39209  
 CONTRACT FOR:

PROJECT:

VIA ARCHITECT:

AIA DOCUMENT G702

PAGE ONE OF 2 PAGES

APPLICATION NO: 1

Distribution to:

PERIOD TO: 1/27/2020


ARCHITECT  
CONTRACTOR

PROJECT NOS:

CONTRACT DATE:

## CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Document G703, is attached.

1. ORIGINAL CONTRACT SUM	\$	<u>30,675.00</u>
2. Net change by Change Orders	\$	<u>                  </u>
3. CONTRACT SUM TO DATE (Line 1 + 2)	\$	<u>30,675.00</u>
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703)	\$	<u>15,337.50</u>
5. RETAINAGE:		
a. % of Completed Work (Column D + E on G703)	\$	<u>0.00</u>
b. % of Stored Material (Column F on G703)	\$	<u>                  </u>
Total Retainage (Lines 5a + 5b or Total in Column I of G703)	\$	<u>0.00</u>
6. TOTAL EARNED LESS RETAINAGE (Line 4 Less Line 5 Total)	\$	<u>15,337.50</u>
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)	\$	<u>                  </u>
8. CURRENT PAYMENT DUE	\$	<u>15,337.50</u>
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)	\$	<u>15,337.50</u>

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner		
Total approved this Month		
TOTALS	\$0.00	\$0.00
NET CHANGES by Change Order	\$0.00	

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR:

By: [Signature] Date: 1-27-20  
 State of MS County of: Hinds  
 Subscribed and sworn to before me this 27th day of Jan 2020  
 Notary Public: Katrina Evans  
 My Commission expires: May 24, 2020



## ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED ..... \$ 15,337.50

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and on the Continuation Sheet that are changed to conform with the amount certified.)

By: [Signature] Date: 1/27/2020

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.



