

STATE OF ARKANSAS **Department of Finance and Administration**

Office of Intergovernmental Services 1515 West Seventh Street, Suite 400

1515 West Seventh Street, Suite 400 Post Office Box 8031 Little Rock, Arkansas, 72203-8031 Phone: (501) 682-1074

Fax: (501) 682-10/4 Fax: (501) 682-5206

https://www.dfa.arkansas.gov/intergovernmental-services

CERTIFICATION OF EXPENDITURE COMPLIANCE

· ,	, do hereby certify that my agency
representatives and I will submit all required exp	enditure documentation for monies spent under
he LLEBG Grant (receipts, invoices etc	c.) to the Department of Finance and
Administration\Intergovernmental Services on or	before 15 days after the project end date. We
agree to comply with all grant requirements to f	fully utilize our Local Law Enforcement Block
Grant (LLEBG) for the purposes outlined in our	approved budget. We understand that failure to
comply with this agreement will result in disq	ualification of my agency in obtaining future
wards and will require reimbursement of funds s	pent.
	Signature of Authorized Official
	Printed Name\Title of Authorized Official
	Timed Name (True of Nathorized Official
	Date