

## Regional IV Grant Expenditure Quote Summary Sheet

Quote #	Vendor/Company Contact Name & Phone Number	AEL#	Equip/Product Description	QTY	\$ each	Other Costs (Shipping, sir chares, fees)	Quote \$ Total
1							\$ -
2							\$ -
3							\$ -
4							\$ -

Notes:

**An approved expenditure request is required prior to the expenditure of grant funds.**

Expenditures of \$0-\$999 require a quote prior to submitting request.

Expenditures \$1,000 and above require three formal quotes prior to submitting request.

Expenditures \$10,000 and above require Commission Approval prior to purchase.

Please include any required EHP documentation.

