

SUBMISSION AND ATTESTATION OF MUNICIPAL SURTAX GRANT PROJECT DELIVERABLES

	ality:	Project ID:	
	y of Deliverables	Duration / Docalling	Assertance Criteria
No.	Description	Duration/Deadline	Acceptance Criteria
	nd, that to the best of my knowledged, meeting all acceptance criteria as		
Municipa (From Pro	al ILA Project Manager: oject Funding Agreement)	(Name and Signature)	
(From Pro	oject Funding Agreement) FOR	(Name and Signature) COUNTY USE ONLY	
(From Pro	pject Funding Agreement) FOR FOR FOR	COUNTY USE ONLY	
From Pro PMO Rev Delive	pject Funding Agreement) FOR FIGURE (If applicable) rables reviewed satisfactorily meet t	COUNTY USE ONLY	
From Pro PMO Rev Delive	pject Funding Agreement) FOR FOR FOR	COUNTY USE ONLY	