Financial Assistance Program

Cooperative Match Project

To be conducted by: Lyons Fire Protection District

Project Number:	5366960
Estimated Project Cost:	$ 90,000.00
Funding provided by CSFS:	$ 45,000.00
Minimum Recipient Match:	$45,000.00
Project to be completed by:	December 31, 2013

Based on the strength of the application submitted by the Lyons Fire Protection District, the Colorado State Forest Service is providing funding in the amount up to but not exceeding **$45,000.00** to accomplish the project described in the attached scope of work.

As the cooperator, Lyons Fire Protection District will be reimbursed for actual costs incurred in implementing the project up to the amount listed above once the following requirements are met:

A. Complete work as described in *"Exhibit A" (scope of work)*.

B. Provide documentation that project funds have been matched at a minimum ratio of 1:1.

Complete and submit through the CSFS Boulder District Office periodic Grant Report(s)/Reimbursement Request(s) using the forms provided in *"Exhibit B, B-1 and Form D"*, as needed, and a Final Report that provides details on expenditures and accomplishments as a result of this project. The District Forester or designee will then forward Exhibit B to the State Office for payment.

C. Certify that neither the cooperator nor any principals represented herein are presently debarred, suspended, proposed for debarment, and declared ineligible or voluntarily excluded from participation in this transaction by any federal department or agency.

This funding will remain available until December 31, 2013. Extension is available for this project if requested prior to December 1, 2013.

As a representative of the cooperator, I have read and understand the conditions of participating in this cooperative match project.

Cooperator Signature: **Date:** 2/5/2013

J.J. Hoffman (Fire Department Chief)
251 Broadway
Lyons, CO 80540
Telephone Number: 303-775-1461
Email Address: chief@lyonsfire.org
Fax: 303-823-5568

EXHIBIT A

Financial Assistance Program

Cooperative Match Project

SCOPE OF WORK

Project Number: 5366960
Project Name: Lyons FPD 2012 Hazardous Fuels Reduction

Cooperator: Lyons Fire Protection District

Work to be completed: The following is an excerpt from the application for this grant and will be used to describe the expected work standards:

Colorado State Forest Service or contracted foresters will define detailed prescription for identified project areas. This will include, at a minimum, limbing of branches up to 6' high, removing trees that have been marked for removal, bucking trees into the appropriate lengths, creating slash piles and possibly chipping procedures in certain areas as the project deems it necessary. It also includes working with individuals from Colorado State Forest Service in laying out the entire project, marking project boundaries, contract negotiations between land owners, gaining license to enter agreements from property owners, final inspections on projects and documenting /tracking progress to insure the goal for the master plan is accomplished. All work completed will be done to CSFS standards for approvable forest stewardship and fire mitigation practices.

The defensible space standards for this project will follow those outlined in CSFS's publication "Fire 2012-1".

Milestone dates:
- January 2013: Meet with homeowners and start advertising service and program.
- January-March 2013: Begin marking projects and start implementing individual projects
- March-December 2013: Complete wildland fuels mitigation efforts.

Standards or Guidelines: Will meet CSFS guidelines appropriate for document.

Project Period: December 1, 2012 to December 31, 2013

Funded Amount: $45,000.00 **Minimum cooperator match**: $45,000.00

Deliverables: 51.4 acres of fuel reduction

All work completed under this project must be certified as meeting minimum Colorado State Forest Service standards prior to any reimbursement being made to the cooperator. "Exhibit B, Grant Report/ Reimbursement Request, Competitive Grants" will be the document used to both request reimbursement and to certify that work has been completed to minimum standards.

Initials:

BB

← Initial

Colorado State Forest Service State Fire Assistance Grant Application

FOR OFFICIAL USE ONLY	
District Submitting Project:	**Boulder**
District Priority Number:	
Dollar Amount Requested:	**$45,000.00**
Matching Share:	**$45,000.00**

For guidance on filling in each box in this application, refer to the *Criteria and Instructions

1	**Applicant Information**	
	Applicant:	Lyons Fire Protection District
	Contact Person:	J.J. Hoffman
	Address:	251 Broadway
	City/Zip Code:	80540
	Phone (Work/Cell):	303-775-1461
	Email:	chief@lyonsfire.org
	Fax:	303-823-5568
	Federal Tax ID\DUNS #:	

2	**Community At Risk Information**			
	Name of Project:	Spring Gulch, Blue Mtn. Lyons Park Estates, Stone Canyon Eagle Ridge		
	Community Name:	Lyons Fire Protection District Mitigation project 2013		
	County(ies):	Boulder and Larimer		
	Congressional District:	2nd		
	Latitude:		**Longitude:**	

3 **Grant Contributors (Matching Share)**

(Applications will be disqualified if insufficient match is identified; federal dollars DO NOT qualify- see criteria & instructions for exception)
Specify each match contributor and the dollar amount of each contribution.
DO NOT show grant requested funds in this table. This is for matching share only.

Contributors Name:	**Private LO Contributions**						**TOTAL**
Dollars (Hard Match):	**45,000**						**45,000**
In-Kind (Soft Match):							
TOTAL:							**45,000**

4 **Total Project Expense (break down matching share totals from block #3)**

Budget Detail (Provide additional information in Block 7)	**Grant Share ($ Amount Requested)**	**Match (from block #3)**		**TOTAL**
		Dollars	**In-Kind**	
Personnel / Labor:	**$41,406.25**	**$41,406.25**		**$82,812.50**
Fringe Benefits:	**0**			
Travel:	**0**			
Equipment:	**2,156.25**	**2,156.25**		**4,312.50**
Supplies:	**1,437.50**	**1,437.50**		**2,875.00**
Contractual:	**0**			
Construction:	**0**			
Other:				
Indirect Costs:	**0**			
TOTAL:	**$45,000.00**	**$45,000.00**		**$90,000.00**

	Budget Narrative
5	Our estimate will contribute full matching funds on both defensible space and thinning projects. We are estimating defensible space prices will range from $ 1,200 an acre on the low end and $ 2,200 an acre on the high end. This is based on slope fuel loading, disposal options acceptable to landowners. We are estimating fuel thinning projects outside of defensible space areas to include road egress/ shaded fuel breaks will range from $1,000 an acre on the low end up to $1,800 an acre on the high end, again based on the same variables mentioned above.

	Project Area Description
6	The project area covers multiple subdivisions in our fire protection district which also includes both Boulder and Larimer County. Our main goal is to work with homeowner's, private land owners to include County and state ownerships in moving forward with road egress issues, fuel break on roads, community fuel breaks both inside the community and on the outside, defensible space and emergency access road mitigation on county lands. We have identified over 1400 acres just areas of road egress issues and fuel breaks that we feel are a high priority. The other main goal is to complete defensible space on properties and tie it into either work that has already been done or is planned on being done in the future. This is only a small piece of the overall goal. Of the 1400 acres identified as a higher priority not including defensible space, we only see completing around 200 acres of that in the next 2 years depending on grant funding and land owner cooperation. The focus on the project listed in this grant if geared primarily at homeowner and firefighter safety. We have identified approx 15 acres of roads and 10 acres for D- space in Spring Gulch. We have identified approx 9 acres of emergency egress roads on county property and another 6 acres for egress along with 10 acres for D- space in Lyons Park Estates. Blue Mountain we have identified approx 9 acres for egress and another 5 acres for D- Space and in Stone Canyon / Eagle Ridge we have identified approx 10 acres for egress and approx 4 for D-space

	Scope of Work
7	**Scope of Work-** Colorado State Forest Service or contracted foresters will define detailed prescription for identified project areas. This will include, at a minimum, limbing of branches up to 6' high, removing trees that have been marked for removal, bucking trees into the appropriate lengths, creating slash piles and possibly chipping procedures in certain areas as the project deems it necessary. It also includes working with individuals from Colorado State Forest Service in laying out the entire project, marking project boundaries, contract negotiations between land owners, gaining license to enter agreements from property owners, final inspections on projects and documenting /tracking progress to insure the goal for the master plan is accomplished. Although we have defined different projects in our request i.e.: Ingress / Egress, Community fuel breaks and Individual D-space, the scope of work will remain the same. The only changes as far as scope of work between the different projects will be the amount of acres for the desired treatment. This is described in the project description and Scientific Foundation/Practice Standards listed above.

Project Summary (check all that apply and answer related questions)

8	**Project Category 1: Hazard Fuels Reduction / Fire Adapted Ecosystem Restoration**			
	Number of acres to be treated:	**51.4**	**Estimated cost per acre:**	**$1,800.00**
	Number of communities directly affected by this project:	**5 +**		
	Project Category 2: Information & Education			
	Number of citizens to be reached:	**Approx 540**		
	Project Category 3: Planning			
	Number of residences affected:	**110-120 ESTIMATED**		

9 Interagency Collaboration

The design of this project was mostly done by the Lyons Fire Protection District with reviews done by Colorado State Forest Service. The CWPP consisted of reviews done by: Colorado State Forest Service, United States Forest Service, Boulder County, Larimer County and Hygiene Fire Protection District.

Our goal in this grant process is to work closely with members from the local Colorado State Forest Service District, in ensuring the projects are done to the correct specifications and plans laid out for the projects. This will consist of pre-planning, marking, project tracking and inspections. We also plan on working with Boulder County in efforts to complete alternate evacuation routes and community fuel breaks in the Lyons Park Estates area. This area as well as others such as, the Button Rock Preserve has been identified in the Boulder County CWPP as a High priority. In a recent meeting with Boulder County, we have identified this area as well as others in our district that we can try to work on reducing hazards, provide mitigation and alternate egress for. The collaboration will be ongoing with these same entities throughout the grant period.

Community Wildfire Protection Plan (CWPP)

Does this community have a wildfire protection plan that follows the Healthy Forest Restoration Act CWPP guidelines? (check one)	**yes XXX in development**
Is this project part of the plan? (check one)	**yes XXX**
Where would we obtain a copy of this plan?	At Lyons Fire or Colorado State Forest Service- Boulder Dist.
Is this project identified in your Statewide Forest Resource Assessment and Strategy?	**yes xxx**

10 Project Timeline

Our goal is once notified on success in receiving grant funds, is to move forward immediately with the projects listed above and be complete in 18 months or less. Our mitigation crew productivity can easily complete the acreage in 18 months; our pacing factor is obtaining private matching funds for completion of the projects.

	Maintenance / Sustainability
11	The long term benefits for this project are reducing the wildfire hazards and risks we have identified in our CWPP. Long term- our goal is to improve community involvement, knowledge and understanding of fire prevention / mitigation, improving our safety zones, establishing solid evacuation routes and individual D-space for homeowners and overall; reduce the possible threat to an un-controllable wildfire. The ultimate long term benefit is getting the community involved and continuing to be involved with the fire protection district. The Maintenance of treated areas is intended to be the responsibility of the individual property owners. The mitigation crews will provide maintenance information to the property owners upon completion of project area. Once the initial efforts are completed we believe the effort and/or cost to maintain the mitigated areas is within the capabilities of most property owners. The fire district will continue to provide information seminars, community and outreach.

	Landscape Scale
12	This project is primarily for D- space and egress. However, all egress work is also intended for shaded fuel breaks or at least tying into shaded fuel breaks. D-space is to eventually incorporate all mitigation work to tie into Boulder County, Federal, State and Lyons Fire Protection District larger scale projects. The overall landscape scale ultimately incorporates all work done under this grant to start moving towards the lager 1400 acre project identified above as well as completing safe egress and defensible space.

ALL INFORMATION MUST FIT INTO THE BOXES PROVIDED. ATTACHMENTS AND/OR MODIFICATIONS WILL NOT BE CONSIDERED BY THE COMMITTEE.

Form 828 - Rev. 3/19/14

COPY

Colorado State University

Colorado State Forest Service
Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Bureau of Land Management Task Order Program	
Volunteer or Rural Fire Assistance (VFA/RFA)	
Colorado Forest Restoration Grant	
Insect and Disease Prevention and Suppression Program	
State Fire Assistance (SFA)	X
Front Range Fuels Treatment Partnership (FRFTP)	
Stevens Fuels Treatment Funds (CAFA)	
Emergency Supplemental Funds (ESF)	

☑ Checked for Federal suspension and debarment (State Office) https://www.sam.gov/portal/public/SAM/ 11-20-15 (KO)

Name: Lyons Fire Protection District

Address: ATTN: JJ Hoffman
251 Broadway
PO Box 695
Lyons, CO 80540

Approved for Payment
C.S.F.S.
7552805
11-20-15
(KO)

The above named has submitted a project application that has been reviewed and approved by the Colorado State Forest Service.

Grant Number: 5366960-BO-Lyons FPD

Non-Federal Match: $14,949.38

Approved Funding: $45,000.00

Total Project: $29,363.76

CSFS Account Number: 5366960-6693
('12 CPG SFA CG4 Projects under SFA-Boulder)

Amount of Payment: $~~22,233.75~~ $14,414.38

Circle one: 1st Payment 2nd Payment 5th Payment Final Payment

Program Manager Signature _____ Date: 11/20/15

Program Manager Name: Scott M. Woods

Colorado State Forest Service
Colorado State University Fort Collins ~ Colorado 80523-5060 ~ (970) 491-6303 ~ FAX: (970) 491-7736

COPY

EXHIBIT B

CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

In order to receive reimbursement, you **must** provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by Form D, receipts for actual costs (out of pocket expenses) incurred by the recipient, and any additional supporting documentation. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and you must show corresponding match.

1. Project/Account #: 5366960 — BO	2. Total Award Amount: $45,000
3. Project Name: Lyons FPD Fire Mitigation Project 2013	4. Reimbursed Amount to Date: $22,766.25
5. Make Payment To: Name: Lyons Fire Protection District Attn: JJ Hoffman Address: 251 Boradway, PO Box 695 Lyons, CO 80540	6. Period of Performance (Project Period): From: December, 2014 To: September 30, 2015

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of, cubic feet or yards of slash collected, number of presentations, number of plans written, etc., for which the award was granted. Attach additional sheets as necessary.

A total of 19.8 acres of fuels mitigation: 10 acres of mitigation for James Herbert, 1 acre of defensible space for Ed Arling, 2 acres of mitigation for Denny Doyle, 1 acre of mitigation for Chris Knapp, 4 acres of mitigation on Lewis Lane, and 1.8 acres of mitigation for Isaiah Russell.

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Remaining Award Amount	B. Reimbursement Requested Amount (recipient cost)	C. Match (recipient cost)	D. Match (non-recipient cost)	E. Total Project Cost	F. Recipient Match Rate (%)
				B+C+D	(C+D)/E
$ 22,233.75	$ 14,414.38	$ 14,949.38		$ 29,363.76	0.509109869

*** Use results from Form D CSFS Financial Assistance Cost Documentation Worksheet to complete table above. Include Form D, and other approved documentation with Exhibit B to request reimbursement.**

Reimbursement Request: I request reimbursement in the amount of $14,414.38 for the work completed and documented above or attached.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: J. J. Hoff Date: 11/4/2015

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: Date: 11/5/15

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: Scott Woods Date: 11/20/15

Rev. November 2013

COPY

CSFS Financial Assistance Cost-Share Program Cost Documentation Worksheet

Project/Account #: 5366960

Award Amount (obligated from funding source): [redacted]

A. Remaining Award Amount: [redacted]

Reimbursement Request: ☐First ☐Second ☐Third ☐Fourth ☑Fifth ☑Final

	Match			
B. Recipient Cost to be reimbursed (not to exceed the remaining award amount and excluding items not eligible for reimbursement)*a	**C. Recipient Cost** (reimbursable costs that exceed the award amount and items or costs not allowable for reimbursement)**a	**D. Non-recipient Cost*b**	**E. Total Project Cost = B+C+D**	**F. Recipient Match Rate = (C+D)/E**
[redacted]	$14,949.38	$0.00	$29,363.76	51%

Date	By Whom	Activity/Expense	Hours	Value ($)	Cost Category
9.2.15	Lyons Fire	Mitigation of 10 acres for James Herbert	n/a	$17,500.00	Actual Cost: reimbursable costs
9.2.15	Lyons Fire	Mitigation of 1 acre for Ed Arling Defensible Space	n/a	$656.00	Actual Cost: reimbursable costs
9.28.15	Lyons Fire	Mitigation of 2 acres for Denny Doyle	n/a	$3,500.00	Actual Cost: reimbursable costs
9.28.15	Lyons Fire	Mitigation of 1 acre for Chris Knapp	n/a	$1,750.00	Actual Cost: reimbursable costs
12.31.14	Lyons Fire	Mitigation of 4 acres for a fuel break on Lewis Property	n/a	$3,342.75	Recipient Labor: reimbursable cost
7.20.15	Lyons Fire	Mitigation of 1.8 acres for Isaiah Russell (not included in previous reimbursment)	n/a	$3,150.00	Actual Cost: reimbursable costs
				$0.00	
				$0.00	
10.7.15	CSFS_BO	*Overpayment of $535.00 for Taetske/Veltien, previous reimbursement payment		-$535.00	Actual Cost: reimbursable costs
		included two separate papyments to these names. These two names are actually one		$0.00	
		person. Lyons fire grant manager made CSFS aware of this error on 10.7.15.		$0.00	
		It was agreed to that Lyons Fire would make the correction on their end and that $535.		$0.00	
		would be taken out of the total request for reimbursement at this time to account for		$0.00	
		the previous overpayment. Landower did not recieve two payments for the same		$0.00	
		project.*		$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	

TOTALS:

G. Cumulative Recipient Cost= $29,363.75

H. Recipient Cost (Match)= $14,949.38

I. Non-recipient Cost (Match)= $0.00

Grant Recipient Signature: [signature] Date: 11/4/2015

District Forester Signature: [signature] Date: 11/5/15

*a **Recipient Cost to be reimbursed** includes: contracted services with receipts; recipients's own labor (i.e. landowner labor) to be valued at current volunteer labor rate; labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented; equipment rental with receipts, use of recipient-owned equipment to valued at current market rental rate; cost of supplies with receipts, including consumable items such as bar oil and two cycle fuel, but does not include repairs or other parts, such as chains, sparkplugs, etc.; materials with receipts; materials, if provided by recipient is to be valued at current market price; meeting room rental with receipts; meeting room provided by recipient to be valued at current market price; printing with receipts

Current volunteer labor rate is the current rate at the time of reimbursement request. ***Reimbursement for these costs cannot exceed the obligated amount and must meet the cost share rate. Any recipient costs categorized as "reimbursable" that exceed the obligated award amount can be used as match to an award.***

*a **Recipient Cost designated as match** includes all items list for *a: contracted services with receipts; recipients's own labor to be valued at current volunteer labor rate; labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented; equipment rental with receipts, use of recipient-owned equipment to valued at current market rental rate; cost of supplies with receipts, including items such as bar oil and two cycle fuel; materials with receipts; materials, if provided to valued at current market price; meeting room rental with receipts; meeting room provided by recipient to be valued at current market price; printing with receipts. Additionally, recipient cost designated as match includes items not eligible for reimbursement such as supplies and repairs or other parts (i.e. chains, sparkplugs, etc.)

Current volunteer labor rate is the current rate at the time of reimbursement request. Any recipient costs can be used as match to an award, including recipient costs categorized as "reimbursable" that exceed the obligated award amount, and supplies, materials and equipment categorized as "non-allowable" can be used as match to an award

*b This includes: volunteers' labor to be valued at current volunteer labor rate; donated materials/supplies to be valued at market value; donated use of equipment to be valued at rental rate; meeting room provided by a third party to be valued at market price.

Non-recipient costs can be used as match to an award and the recipient will not be reimbursed for these costs

Carlin,KAREN

From: Wassink,Collin
Sent: Friday, November 20, 2015 3:19 PM
To: Owen Jr,Allen
Cc: Carlin,KAREN
Subject: Re: Quick Question - Reimbursement to Lyons FPD 5366960-BO-Lyons FPD 5th and Final Payment

Karen,

I'm not feeling like I'm kicking butt on grants.

Anyhow, Señor Owen has forwarded me your grant question, pertaining to the Lyons FPD final grant reimbursement for the 2012 SFA grant.

What I did was transpose the remaining grant funding (pre payment) number of $22K instead of the correct reimbursement request number of $14,414.38.

So, the correct reimbursement amount is $14,414.38, not the $22,233.75 on the 828 form.

Collin Wassink
Assistant District Forester
Colorado State Forest Service
303-823-5774
5625 Ute Hwy
Longmont, CO 80503

Under CO Open Records Act, all messages sent to or by me from this account may be subject to public disclosure.

From: Carlin,KAREN
Sent: Friday, November 20, 2015 2:35 PM
To: Owen Jr,Allen <Allen.OWEN@colostate.edu>
Subject: Quick Question - Reimbursement to Lyons FPD 5366960-BO-Lyons FPD 5th and Final Payment
Importance: High

Hi, Allen.

The Form 828 submitted to reimburse the Lyons FPD against account 5366960 reflects an "Amount of Payment" of $22,233.75; however, the related Exhibit B indicates that they are only requesting a reimbursement of $14,414.38 (scanned copies attached). Which is correct? Just let me know. Thanks.

Best regards,
Karen Carlin
Administrative Services
Colorado State Forest Service
(970) 491-3006

Colorado State Forest Service
Boulder District
5625 Ute Highway
Longmont, CO 80503
(303) 823-5774
FAX: (303) 823-5768

October 23, 2015

ATTN: JJ Hoffman
Lyons Fire Protection District
251 Broadway, PO Box 695
Lyons, CO 80540

Dear Mr. Hoffman,

This letter is to notify you of the close out of the "Lyons Fire Protection District Fire Mitigation Project – 2013" 2012 State Fire Assistance Grant. This letter will be accompanied by the final reimbursement paperwork for the grant. Please review these documents then sign them and return them, with signature, to the Colorado State Forest Service Boulder District Office. After this final documentation has been processed, the remaining funds in the account will be unencumbered and released back to the CSFS Grant Management Program.

We appreciate being able to work with you, through this grant, in order to get fuels mitigation work completed. If you have any questions please do not hesitate to contact us.

Sincerely,

Collin Wassink
Asst. District Forester

EXHIBIT B

CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

In order to receive reimbursement, you **must** provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by Form D, receipts for actual costs (out of pocket expenses) incurred by the recipient, and any additional supporting documentation. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and you must show corresponding match.

1. Project/Account #: 5366960	2. Total Award Amount: $45,000
3. Project Name: Lyons FPD Fire Mitigation Project 2013	4. Reimbursed Amount to Date: $22,766.25
5. Make Payment To: Name: Lyons Fire Protection District Attn: JJ Hoffman Address: 251 Boradway, PO Box 695 Lyons, CO 80540	6. Period of Performance (Project Period): From: December, 2014 To: September 30, 2015

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of, cubic feet or yards of slash collected, number of presentations, number of plans written, etc., for which the award was granted. Attach additional sheets as necessary.

A total of 19.8 of fuels mitigation: 10 acres of mitigation for James Herbert, 1 acre of defensible space for Ed Arling, 2 acres of mitigation for Denny Doyle, 1 acre of mitigation for Chris Knapp, 4 acres of mitigation on Lewis Lane, and 1.8 acres of mitigation for Isaiah Russell.

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Remaining Award Amount	B. Reimbursement Requested Amount (recipient cost)	C. Match (recipient cost)	D. Match (non-recipient cost)	E. Total Project Cost	F. Recipient Match Rate (%)
				B+C+D	(C+D)/E
$ 22,233.75	$ 14,414.38	$ 14,949.38		$ 29,363.76	0.509109869

*** Use results from Form D CSFS Financial Assistance Cost Documentation Worksheet to complete table above. Include Form D, and other approved documentation with Exhibit B to request reimbursement.**

Reimbursement Request: I request reimbursement in the amount of $14,414.38 for the work completed and documented above or attached.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: J. J. Hoffman Date: 11/4/2015

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: [signature] Date: 11/5/15

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: _____ Date:

Form D

CSFS Financial Assistance Cost-Share Program Cost Documentation Worksheet

Project/Account #: 5366960
Award Amount (obligated from funding source): $45,000.00
A. Remaining Award Amount: $22,233.75

Reimbursement Request: ☐First ☐Second ☐Third ☐Fourth ☑Fifth ☑Final

	Match			
B. Recipient Cost to be reimbursed (not to exceed the remaining award amount and excluding items not eligible for reimbursement)*a	**C. Recipient Cost** (reimbursable costs that exceed the award amount and items or costs not allowable for reimbursement)**a	**D. Non-recipient Cost***b	**E. Total Project Cost = B+C+D**	**F. Recipient Match Rate = (C+D)/E**
$14,414.38	$14,949.38	$0.00	$29,363.76	51%

Date	By Whom	Activity/Expense	Hours	Value ($)	Cost Category
9.2.15	Lyons Fire	Mitigation of 10 acres for James Herbert	n/a	$17,500.00	Actual Cost: reimbursable costs
9.2.15	Lyons Fire	Mitigation of 1 acre for Ed Arling Defensible Space	n/a	$656.00	Actual Cost: reimbursable costs
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		included two separate papyments to these names. These two names are actually one		$0.00	
		person. Lyons fire grant manager made CSFS aware of this error on 10.7.15.		$0.00	
		It was agreed to that Lyons Fire would make the correction on their end and that $535.		$0.00	
		would be taken out of the total request for reimbursement at this time to account for		$0.00	
		the previous overpayment. Landower did not recieve two payments for the same		$0.00	
		project.*		$0.00	
				$0.00	
				$0.00	
				$0.00	

TOTALS:
G. Cumulative Recipient Cost= $29,363.75
H. Recipient Cost (Match)= $14,949.38
I. Non-recipient Cost (Match)= $0.00

Grant Recipient Signature: _____ Date: 11/4/2015

District Forester Signature: _____ Date: 11/5/15

*[a] **Recipient Cost to be reimbursed** includes: contracted services with receipts; recipients's own labor (i.e. landowner labor) to be valued at current volunteer labor rate; labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented; equipment rental with receipts, use of recipient-owned equipment to valued at current market rental rate; cost of supplies with receipts, including consumable items such as bar oil and two cycle fuel, but does not include repairs or other parts, such as chains, sparkplugs, etc.; materials with receipts; materials, if provided by recipient is to be valued at current market price; meeting room rental with receipts; meeting room provided by recipient to be valued at current market price; printing with receipts

Current volunteer labor rate is the current rate at the time of reimbursement request. ***Reimbursement for these costs cannot exceed the obligated amount and must meet the cost share rate. Any recipient costs categorized as "reimbursable" that exceed the obligated award amount can be used as match to an award.***

[a] **Recipient Cost designated as match** includes all items list for [a]: contracted services with receipts; recipients's own labor to be valued at current volunteer labor rate; labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented; equipment rental with receipts, use of recipient-owned equipment to valued at current market rental rate; cost of supplies with receipts, including items such as bar oil and two cycle fuel; materials with receipts; materials, if provided to valued at current market price; meeting room rental with receipts; meeting room provided by recipient to be valued at current market price; printing with receipts. Additionally, recipient cost designated as match includes items not eligible for reimbursement such as supplies and repairs or other parts (i.e. chains, sparkplugs, etc.)

Current volunteer labor rate is the current rate at the time of reimbursement request. Any recipient costs can be used as match to an award, including recipient costs categorized as "reimbursable" that exceed the obligated award amount, and supplies, materials and equipment categorized as "non-allowable" can be used as matchto an award

*[b] This includes: volunteers' labor to be valued at current volunteer labor rate; donated materials/supplies to be valued at market value; donated use of equipment to be valued at rental rate; meeting room provided by a third party to be valued at market price.

Non-recipient costs can be used as match to an award and the recipient will not be reimbursed for these costs

Colorado State Forest Service
Boulder District
5625 Ute Highway
Longmont, CO 80503
(303) 823-5774
FAX: (303) 823-5768

October 23, 2015

ATTN: JJ Hoffman
Lyons Fire Protection District
251 Broadway, PO Box 695
Lyons, CO 80540

Dear Mr. Hoffman,

This letter is to notify you of the close out of the "Lyons Fire Protection District Fire Mitigation Project – 2013" 2012 State Fire Assistance Grant. This letter will be accompanied by the final reimbursement paperwork for the grant. Please review these documents then sign them and return them, with signature, to the Colorado State Forest Service Boulder District Office. After this final documentation has been processed, the remaining funds in the account will be unencumbered and released back to the CSFS Grant Management Program.

We appreciate being able to work with you, through this grant, in order to get fuels mitigation work completed. If you have any questions please do not hesitate to contact us.

Sincerely,

Collin Wassink
Asst. District Forester

	Projects completed -- Need to Turn in for Re- Imbursment as of 9-30-15								
Project Name	**Acres Treated**	**$875 / acre**		**Total Due From State Grant back to LFPD**					
		Landowner Match							
Arling	0.5	$328.00	$656.00	$328.00		601 1/2 Indian Lookout Drive			
Herbert	10	$8,750.00	$17,500.00	$8,750.00		363 Pioneer			
Lewis Lane Fuel	4	$3,342.75	$3,500.00	$3,342.75		Lewis Lane Fuel Break			
Doyle	2	$1,750.00	$3,500.00	$1,750.00		2519 Blue Mt Trail			
Kanpp	1	$875.00	$1,750.00	$875.00		2548 Blue Mt Trail			
			$26,906.00	$15,045.75					

add Russell

Same Guy

Slattery - 2625

Taeske Veltein - lac. - 535

Ryan - 1.8 - 1,575

Booker - 1 - 875

add Russell - 1

- Short them $535 for overpayment
Add Russell payment, and additional expenditures for Lewis Lane

- Create seperate line item for $535

Lyons Fire Protection District

INVOICE

P.O. Box 695
Lyons, CO 80540
Phone (303) 823-6611 Fax (303) 823-5568

DATE: July 20, 2015
INVOICE # 20150720-1

BILL TO:
Isaiah Russell
6528 Jefferson Street
Kansas City, MO 64113

FOR:
Wildland fire mitigation
6058 Longmont Dam Road
Lyons, Colorado
NOT FOR FIRE SUPPRESSION

DESCRIPTION	Qty	RATE	AMOUNT
Wildland fire mitigation - 1.8 acre	1.80	1,750.00	$ 3,150.00
Mitigation, limbing and piling of slash for burning			
Less Deposit			(780.00)
PAID 8/10/15			
Equipment: Ck# 1580			
Materials:			
Other:			
		TOTAL	**$ 2,370.00**

Please make checks payable to **Lyons Fire Protection District.**
Total due in 15 days. Overdue accounts subject to a service charge of 1% per month.

Lyons Fire Protection District

INVOICE

P.O. Box 695
Lyons, CO 80540
Phone (303) 823-6611 Fax (303) 823-5568

DATE: September 28, 2015
INVOICE # 20151019-2

BILL TO:
Chris Knapp
2548 Blue Muntain Trail
Lyons, CO 80540

FOR:
Wildland fire mitigation
2548 Blue Mountain Trail
Lyons, Colorado
NOT FOR FIRE SUPPRESSION

DESCRIPTION	Qty	RATE	AMOUNT
Wildland fire mitigation - 1	1.00	1750.00	$ 1,750.00
Mitigation, limbing and piling of slash for burning			(500.00}
Less Deposit			
Equipment:			
Materials:			
Other:			
		TOTAL	**$1,250.00**

Please make checks payable to **Lyons Fire Protection District**
Total due in 15 days. Overdue accounts subject to a service charge of 1% per month.

Lyons Fire Protection District

INVOICE

P.O. Box 695
Lyons, CO 80540
Phone (303) 823-6611 Fax (303) 823-5568

DATE: September 2, 2015
INVOICE # 20150902-1

BILL TO:
James Herbert
363 Pioneer Road
Lyons, CO 80540

FOR:
Wildland fire mitigation
363 Pioneer Road
Lyons, Colorado
NOT FOR FIRE SUPPRESSION

DESCRIPTION	Qty	RATE	AMOUNT
Wildland fire mitigation - 10 acres	10.00	1,750.00	$ 17,500.00
Mitigation, limbing and piling of slash for burning			
Less Deposit			(2,187.50)
Equipment:			
Materials:			
Other:			
		TOTAL	**$ 15,312.50**

Please make checks payable to **Lyons Fire Protection District.**
Total due in 15 days. Overdue accounts subject to a service charge of 1% per month.

Lyons Fire Protection District

INVOICE

P.O. Box 695
Lyons, CO 80540
Phone (303) 823-6611 Fax (303) 823-5568

DATE: September 2, 2015
INVOICE # 20150902-2

BILL TO:
Ed Arling
601 1/2 Indian Lookout Road
Lyons, CO 80540

FOR:
Wildland fire mitigation
601 1/2 Indian Lookout Road
Lyons, Colorado
NOT FOR FIRE SUPPRESSION

DESCRIPTION	Qty	RATE	AMOUNT
Wildland fire mitigation - remove 15 trees with burn piles	10.00	1,750.00	$ 656.00
Equipment:			
Materials:			
Other:			
		TOTAL	**$ 656.00**

Please make checks payable to **Lyons Fire Protection District.**
Total due in 15 days. Overdue accounts subject to a service charge of 1% per month.

Lyons Fire Protection District

INVOICE

P.O. Box 695
Lyons, CO 80540
Phone (303) 823-6611 Fax (303) 823-5568

DATE: September 28, 2015
INVOICE # 20151019-2

BILL TO:
Denny Doyle
2519 Blue Muntain Trail
Lyons, CO 80540

FOR:
Wildland fire mitigation
2519 Blue Mountain Trail
Lyons, Colorado
NOT FOR FIRE SUPPRESSION

DESCRIPTION	Qty	RATE	AMOUNT
Wildland fire mitigation - 2 acres	2.00	1750.00	$ 3,500.00
Mitigation, limbing and piling of slash for burning			(1,200.00)
Less Deposit			
Equipment:			
Materials:			
Other:			
		TOTAL	**$2,300.00**

Please make checks payable to **Lyons Fire Protection District.**
Total due in 15 days. Overdue accounts subject to a service charge of 1% per month.

Cost Share Tracking Lewis Lane Shaded Fuel Break Approx 4 acres					
Date	**By Whom**	**Activity/Expense**	**Hours**	**Value ($)**	**Cost Category**
August 2, 2013	Paul Davidovich	Cutting	3	72	Labor
August 2, 2013	Mike Sloan	Cutting	3	72	Labor
October 2, 2013	Mike Sloan	Cutting	3.5	84	Labor
December 31, 2013	Mike Sloan	Chipping	1	24	Labor
December 31, 2013	Paul Davidovich	Chipper Use	1	30	Equipment Rental Rate
March 9, 2014	Paul Davidovich	Cutting	2.5	60	Labor
March 9, 2014	Mike Sloan	Cutting	2.5	60	Labor
May 21, 2014	Paul Davidovich	Cutting	4	96	Labor
May 23, 2014	Paul Davidovich	Cutting	4	96	Labor
May 23, 2014	Maureen Davidovich	Dragging Slash	4	96	Labor
May 23, 2014	Mike Sloan	Cutting	4	96	Labor
May 26, 2014	Paul Davidovich	Cutting	2	48	Labor
May 26, 2014	Maureen Davidovich	Dragging Slash	2	48	Labor
June 4, 2014	Paul Davidovich	Chipping	4	96	Labor
June 4, 2014	Maureen Davidovich	Chipping & Dragging Slash	4	96	Labor
June 4, 2014	Paul Davidovich	Chipper Use	4	120	Equipment Rental Rate
June 6, 2014	Paul Davidovich	Chipping	4	96	Labor
June 6, 2014	Maureen Davidovich	Chipping & Dragging Slash	4	96	Labor
June 6, 2014	Mike Sloan	Chipping & Dragging Slash	4	96	Labor
June 6, 2014	Paul Davidovich	Chipper Use	4	120	Equipment Rental Rate
June 9, 2014	Paul Davidovich	Chipping & Dragging Slash	4	96	Labor
June 9, 2014	Maureen Davidovich	Chipping & Dragging Slash	4	96	Labor
June 9, 2014	Paul Davidovich	Chipper Use	4	120	Equipment Rental Rate
July 17, 2014	Paul Davidovich	Cutting	4	96	Labor
July 17, 2014	Mike Sloan	Cutting	4	96	Labor
July 17, 2014	Maureen Davidovich	Dragging Slash	4	96	Labor
July 22, 2014	Paul Davidovich	Chipping	3	72	Labor
July 22, 2014	Maureen Davidovich	Chipping & Dragging Slash	3	72	Labor
July 22, 2014	Paul Davidovich	Chipper Use	3	90	Equipment Rental Rate
August 4, 2014	Paul Davidovich	Cutting	3	72	Labor
August 4, 2014	Maureen Davidovich	Dragging Slash	3	72	Labor

August 22, 2014	Paul Davidovich	Cutting	1.5	36	Labor
August 22, 2014	Maureen Davidovich	Dragging Slash	1.5	36	Labor
August 22, 2014	Mike Sloan	Cutting	1.5	36	Labor
August 25, 2014	Paul Davidovich	Cutting	1	24	Labor
August 25, 2014	Maureen Davidovich	Dragging Slash	1	24	Labor
November 13, 2014	Paul Davidovich	Chipping	2	48	Labor
November 13, 2014	Paul Davidovich	Chipper Use	2	60	Equipment Rental Rate
December 1, 2014	Paul Davidovich	Cutting	2	48	Labor
December 1, 2014	Paul Davidovich	Dragging Slash	2	48	Labor
December 1, 2014	Mike Sloan	Cutting	2	48	Labor
December 31, 2014	Paul Davidovich	Chipping	3	72	Labor
December 31, 2014	Paul Davidovich	Chipper Use	3	90	Equipment Rental Rate
	Mike Sloan	Oil & Gas for Chain Saw	N/A	46.25	Supplies
	Paul Davidovich	Oil & Gas for Chain Saw	N/A	62.5	Supplies
	Paul Davidovich	Gas for Chipper	N/A	84	Supplies
			total	**3342.75**	

SubTotals	Paul Davidovich		49	1176	Labor	cutting	25
	Maureen Davidovich		30.5	732	Labor		
	Mike Sloan		25.5	612	Labor	cutting	18.5
	Paul Davidovich	Chipper Use	21	630	Equipment Rental		
	Paul Davidovich	Oil & Gas for Chain Saw		62.5	Supplies		
	Mike Sloan	Oil & Gas for Chain Saw		46.25	Supplies		
	Paul Davidovich	Gass for Chipper		84	Supplies	84	
				3342.75			

6.25

4.625

$4 \cdot 875 = 3500 \cdot 2$ 7000K

Form 828 - Rev. 3/19/14

COPY

Colorado State University

Colorado State Forest Service
Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Bureau of Land Management Task Order Program	
Volunteer or Rural Fire Assistance (VFA/RFA)	
Colorado Forest Restoration Grant	
Insect and Disease Prevention and Suppression Program	
State Fire Assistance (SFA)	X
Front Range Fuels Treatment Partnership (FRFTP)	
Stevens Fuels Treatment Funds (CAFA)	
Emergency Supplemental Funds (ESF)	

☑ Checked for Federal suspension and debarment (State Office) https://www.sam.gov/portal/public/SAM/ 09-21-15 (KO)

Name: Lyons Fire Protection District

Address: ATTN: JJ Hoffman
251 Broadway
PO Box 695
Lyons, CO 80540

Approved for Payment
C.S.F.S.
7020890
09-22-15
(KO)

The above named has submitted a project application that has been reviewed and approved by the Colorado State Forest Service.

Grant Number: 5366960-BO-Lyons FPD

Non-Federal Match: $6,396.25

Approved Funding: $45,000.00

Total Project: $12,540.00

CSFS Account Number: 5366960-6693
('12 CPG SFA CG4 Projects under SFA-Boulder)

Amount of Payment: $6,143.75

Circle one: 1st Payment 2nd Payment 4th Payment Final Payment

Program Manager Signature [signature] Date: 9/21/15

Program Manager Name: Scott M. Woods

Colorado State Forest Service
Colorado State University Fort Collins ~ Colorado 80523-5060 ~ (970) 491-6303 ~ FAX: (970) 491-7736

COPY

EXHIBIT B

CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

In order to receive reimbursement, you **must** provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by Form D, receipts for actual costs (out of pocket expenses) incurred by the recipient, and any additional supporting documentation. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and you must show corresponding match.

1. Project/Account #: 5366960 – BO	2. Total Award Amount: $45,000
3. Project Name: Lyons FPD Fire Mitigation Project 2013	4. Reimbursed Amount to Date: $16,622.50
5. Make Payment To: Name: Lyons Fire Protection District Attn: JJ Hoffman Address: 251 Boradway, PO Box 695 Lyons, CO 80540	6. Period of Performance (Project Period): From: May, 2015 To: August, 2015

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of, cubic feet or yards of slash collected, number of presentations, number of plans written, etc., for which the award was granted. Attach additional sheets as necessary.

3 acres of fire mitigation on the Slattery property, 0.61 acres of mitigation of the Veltien property and 1 acre of defensible space installation on the Taetske and Booker properties and 1.8 acres of defensible space installation on the Ryan property. A total of 7.41 acres of fire mitigation completed using this grant.

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Remaining Award Amount	B. Reimbursement Requested Amount (recipient cost)	C. Match (recipient cost)	D. Match (non-recipient cost)	E. Total Project Cost	F. Recipient Match Rate (%)
				B+C+D	(C+D)/E
$ 28,377.50	$ 6,143.75	$ 6,396.25		$ 12,540.00	0.510067783

*** Use results from Form D CSFS Financial Assistance Cost Documentation Worksheet to complete table above. Include Form D, and other approved documentation with Exhibit B to request reimbursement.**

Reimbursement Request: I request reimbursement in the amount of $6,143.75 for the work completed and documented above or attached.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: Asst. Chief Date: 2 Aug 2015

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: Date: 8/8/15

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: SCOTT WOODS Date: 9/21/15

Rev. November 2013

COPY

Form D

CSFS Financial Assistance Cost-Share Program Cost Documentation Worksheet

Project/Account #: 5366960
Award Amount (obligated from funding source): [redacted]
A. Remaining Award Amount: [redacted]
Reimbursement Request: ☐First ☐Second ☐Third ☑Fourth ☐Fifth ☐Final

[redacted]	Match		[redacted]	[redacted]
B. Recipient Cost to be reimbursed (not to exceed the remaining award amount and excluding items not eligible for reimbursement)*a	**C. Recipient Cost** (reimbursable costs that exceed the award amount and items or costs not allowable for reimbursement)**a	**D. Non-recipient Cost*b**	**E. Total Project Cost = B+C+D**	**F. Recipient Match Rate = (C+D)/E**
[redacted]	$6,396.25	$0.00	$12,540.00	51%

Date	By Whom	Activity/Expense	Hours	Value ($)	Cost Category
6.1.15	Lyons Fire	Mitigation of 3 acres for Slattery	n/a	$5,250.00	Actual Cost: reimbursable costs
6.1.15	Lyons Fire	Mitigation of 1 acre for Taetske Defensible Space	n/a	$1,070.00	Actual Cost: reimbursable costs
6.15.15	Lyons Fire	Mitigation of 1.8 acres for Ryan Defensible Space	n/a	$3,150.00	Actual Cost: reimbursable costs
6.30.15	Lyons Fire	Mitigation of 1 acre for Booker Defensible Space	n/a	$2,000.00	Actual Cost: reimbursable costs
6.10.15	Lyons Fire	Mitigation if .61 acres Veltien Defensible Space	n/a	$1,070.00	Actual Cost: reimbursable costs
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	

TOTALS: **G. Cumulative Recipient Cost=** $12,540.00
[redacted] $6,396.25
I. Non-recipient Cost (Match)= $0.00

Grant Recipient Signature: _____ Date: _____

District Forester Signature: _____ Date: 8/8/15

*a **Recipient Cost to be reimbursed** includes: contracted services with receipts; recipients's own labor (i.e. landowner labor) to be valued at current volunteer labor rate; labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented; equipment rental with receipts, use of recipient-owned equipment to valued at current market rental rate; cost of supplies with receipts, including consumable items such as bar oil and two cycle fuel, but does not include repairs or other parts, such as chains, sparkplugs, etc.; materials with receipts; materials, if provided by recipient is to be valued at current market price; meeting room rental with receipts; meeting room provided by recipient to be valued at current market price; printing with receipts

Current volunteer labor rate is the current rate at the time of reimbursement request. ***Reimbursement for these costs cannot exceed the obligated amount and must meet the cost share rate. Any recipient costs categorized as "reimbursable" that exceed the obligated award amount can be used as match to an award.***

*a **Recipient Cost designated as match** includes all items list for *a: contracted services with receipts; recipients's own labor to be valued at current volunteer labor rate; labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented; equipment rental with receipts, use of recipient-owned equipment to valued at current market rental rate; cost of supplies with receipts, including items such as bar oil and two cycle fuel; materials with receipts; materials, if provided to valued at current market price; meeting room rental with receipts; meeting room provided by recipient to be valued at current market price; printing with receipts. Additionally, recipient cost designated as match includes items not eligible for reimbursement such as supplies and repairs or other parts (i.e. chains, sparkplugs, etc.)

Current volunteer labor rate is the current rate at the time of reimbursement request. Any recipient costs can be used as match to an award, including recipient costs categorized as "reimbursable" that exceed the obligated award amount, and supplies, materials and equipment categorized as "non-allowable" can be used as match to an award

*b This includes: volunteers' labor to be valued at current volunteer labor rate; donated materials/supplies to be valued at market value; donated use of equipment to be valued at rental rate; meeting room provided by a third party to be valued at market price.

Non-recipient costs can be used as match to an award and the recipient will not be reimbursed for these costs

Lyons Fire Protection District
SFA Grant - Project Number 5366960-BO

Award $45,000

Payment History:	Amount	Reference	Date
1st Payment	$1,137.50	Doc Nbr 2420414	5/22/2013
2nd Payment	$7,700.00	Doc Nbr 2781425	1/15/2014
3rd Payment	$7,785.00	Doc Nbr 5922927	5/7/2015
Current Payment	$6,143.75	Doc Nbr 7020890	9/22/2015
Total	$22,766.25		

	Projects completed - - Need to Turn in for Reimbursement as of 7-6-15					
Project Name	**Acres Treated**	**$875 / acre**		**Total Due From State Grant back to LFPD**		
		Landowner Match				
Slattery	3	$2,625.00	$5,250.00	52.92 $2,625.00		2745 Spring Gulch Road
Taetske	1	$535.00	$1,070.00	$535.00		635 Lake Drive
Ryan	1.8	$1,575.00	$3,150.00	$1,575.00		394 Sandstone Drive
Booker	1	$875.00	$2,000.00	$875.00		1047 Spring Gulch Drive
			$11,470.00	$5,610.00		

Lyons Fire Protection District

INVOICE

P.O. Box 695
Lyons, CO 80540
Phone (303) 823-6611 Fax (303) 823-5568

DATE: May 18, 2015
INVOICE # 20150518-1

BILL TO:
Tim Slattery
35 Martin Lane
Englewood, CO 80113

FOR:
Wildland fire mitigation
2745 Spring Gulch Drive
Lyons, Colorado
NOT FOR FIRE SUPPRESSION

DESCRIPTION	Qty	RATE	AMOUNT
Wildland fire mitigation - 3 acres	3.00	1,750.00	$ 5,250.00
PAID 5/18/15 ck#2285			
Equipment:			
Materials:			
Other:			
		TOTAL	**$ 5,250.00**

Please make checks payable to **Lyons Fire Protection District.**
Total due in 15 days. Overdue accounts subject to a service charge of 1% per month.

EXHIBIT B

CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

In order to receive reimbursement, you **must** provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by Form D, receipts for actual costs (out of pocket expenses) incurred by the recipient, and any additional supporting documentation. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and you must show corresponding match.

1. Project/Account #: 5366960	2. Total Award Amount: $45,000
3. Project Name: Lyons FPD Fire Mitigation Project 2013	4. Reimbursed Amount to Date: $16,622.50
5. Make Payment To: Name: Lyons Fire Protection District Attn: JJ Hoffman Address: 251 Boradway, PO Box 695 Lyons, CO 80540	6. Period of Performance (Project Period): From: May, 2015 To: August, 2015

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of, cubic feet or yards of slash collected, number of presentations, number of plans written, etc., for which the award was granted. Attach additional sheets as necessary.

3 acres of fire mitigation on the Slattery property, 0.61 acres of mitigation of the Veltien property and 1 acre of defensible space installation on the Taetske and Booker properties and 1.8 acres of defensible space installation on the Ryan property. A total of 7.41 acres of fire mitigation completed using this grant.

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Remaining Award Amount	B. Reimbursement Requested Amount (recipient cost)	C. Match (recipient cost)	D. Match (non-recipient cost)	E. Total Project Cost	F. Recipient Match Rate (%)
				B+C+D	(C+D)/E
$ 28,377.50	$ 6,143.75	$ 6,396.25		$ 12,540.00	0.510067783

*** Use results from Form D CSFS Financial Assistance Cost Documentation Worksheet to complete table above. Include Form D, and other approved documentation with Exhibit B to request reimbursement.**

Reimbursement Request: I request reimbursement in the amount of $6,143.75 for the work completed and documented above or attached.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: Asst. Chief Date: 2 Aug 2015

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: _____ Date: 8/8/15

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: _____ Date:

CSFS Financial Assistance Cost-Share Program Cost Documentation Worksheet

Project/Account #: 5366960

Award Amount (obligated from funding source): $45,000.00

A. Remaining Award Amount: $23,377.50

Reimbursement Request: ☐First ☐Second ☐Third ☑Fourth ☐Fifth ☐Final

	Match			
B. Recipient Cost to be reimbursed (not to exceed the remaining award amount and excluding items not eligible for reimbursement)*a	**C. Recipient Cost** (reimbursable costs that exceed the award amount and items or costs not allowable for reimbursement)**a	**D. Non-recipient Cost*b**	**E. Total Project Cost = B+C+D**	**F. Recipient Match Rate = (C+D)/E**
$6,143.75	$6,396.25	$0.00	$12,540.00	51%

Date	By Whom	Activity/Expense	Hours	Value ($)	Cost Category
6.1.15	Lyons Fire	Mitigation of 3 acres for Slattery	n/a	$5,250.00	Actual Cost: reimbursable costs
6.1.15	Lyons Fire	Mitigation of 1 acre for Taetske Defensible Space	n/a	$1,070.00	Actual Cost: reimbursable costs
6.15.15	Lyons Fire	Mitigation of 1.8 acres for Ryan Defensible Space	n/a	$3,150.00	Actual Cost: reimbursable costs
6.30.15	Lyons Fire	Mitigation of 1 acre for Booker Defensible Space	n/a	$2,000.00	Actual Cost: reimbursable costs
6.10.15	Lyons Fire	Mitigation if .61 acres Veltien Defensible Space	n/a	$1,070.00	Actual Cost: reimbursable costs
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	

TOTALS:
G. Cumulative Recipient Cost= $12,540.00
H. Recipient Cost (Match)= $6,396.25
I. Non-recipient Cost (Match)= $0.00

Grant Recipient Signature: _____ Date: _____

District Forester Signature: _____ Date: 8/8/15

*[a] **Recipient Cost to be reimbursed** includes: contracted services with receipts; recipients's own labor (i.e. landowner labor) to be valued at current volunteer labor rate; labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented; equipment rental with receipts, use of recipient-owned equipment to valued at current market rental rate; cost of supplies with receipts, including consumable items such as bar oil and two cycle fuel, but does not include repairs or other parts, such as chains, sparkplugs, etc.; materials with receipts; materials, if provided by recipient is to be valued at current market price; meeting room rental with receipts; meeting room provided by recipient to be valued at current market price; printing with receipts

Current volunteer labor rate is the current rate at the time of reimbursement request. ***Reimbursement for these costs cannot exceed the obligated amount and must meet the cost share rate. Any recipient costs categorized as "reimbursable" that exceed the obligated award amount can be used as match to an award.***

[a] **Recipient Cost designated as match** includes all items list for [a]: contracted services with receipts; recipients's own labor to be valued at current volunteer labor rate; labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented; equipment rental with receipts, use of recipient-owned equipment to valued at current market rental rate; cost of supplies with receipts, including items such as bar oil and two cycle fuel; materials with receipts; materials, if provided to valued at current market price; meeting room rental with receipts; meeting room provided by recipient to be valued at current market price; printing with receipts. Additionally, recipient cost designated as match includes items not eligible for reimbursement such as supplies and repairs or other parts (i.e. chains, sparkplugs, etc.)

Current volunteer labor rate is the current rate at the time of reimbursement request. Any recipient costs can be used as match to an award, including recipient costs categorized as "reimbursable" that exceed the obligated award amount, and supplies, materials and equipment categorized as "non-allowable" can be used as matchto an award

*[b] This includes: volunteers' labor to be valued at current volunteer labor rate; donated materials/supplies to be valued at market value; donated use of equipment to be valued at rental rate; meeting room provided by a third party to be valued at market price.

Non-recipient costs can be used as match to an award and the recipient will not be reimbursed for these costs

Submitted for Signature 9/2/15 to LFPD

EXHIBIT B
CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

In order to receive reimbursement, you **must** provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by Form D, receipts for actual costs (out of pocket expenses) incurred by the recipient, and any additional supporting documentation. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and you must show corresponding match.

1. Project/Account #: 5366960	2. Total Award Amount: $45,000
3. Project Name: Lyons FPD Fire Mitigation Project 2013	4. Reimbursed Amount to Date: $16,622.50
5. Make Payment To: Name: Lyons Fire Protection District Attn: JJ Hoffman Address: 251 Boradway, PO Box 695 Lyons, CO 80540	6. Period of Performance (Project Period): From: May, 2015 To: August, 2015

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of, cubic feet or yards of slash collected, number of presentations, number of plans written, etc., for which the award was granted. Attach additional sheets as necessary.

3 acres of fire mitigation on the Slattery property, 0.61 acres of mitigation of the Veltien property and 1 acre of defensible space installation on the Taetske and Booker properties and 1.8 acres of defensible space installation on the Ryan property. A total of 7.41 acres of fire mitigation completed using this grant.

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Remaining Award Amount	B. Reimbursement Requested Amount (recipient cost)	C. Match (recipient cost)	D. Match (non-recipient cost)	E. Total Project Cost	F. Recipient Match Rate (%)
				B+C+D	(C+D)/E
$ 28,377.50	$ 6,143.75	$ 6,396.25		$ 12,540.00	0.510067783

*** Use results from Form D CSFS Financial Assistance Cost Documentation Worksheet to complete table above. Include Form D, and other approved documentation with Exhibit B to request reimbursement.**

Reimbursement Request: I request reimbursement in the amount of $6,143.75 for the work completed and documented above or attached.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: _____ Date:

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: _____ Date:

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: _____ Date:

Form D

CSFS Financial Assistance Cost-Share Program Cost Documentation Worksheet

Project/Account #: 5366960
Award Amount (obligated from funding source): $45,000.00
A. Remaining Award Amount: $28,377.50
Reimbursement Request: ☐First ☐Second ☐Third ☑Fourth ☐Fifth ☐Final

	Match			
B. Recipient Cost to be reimbursed (not to exceed the remaining award amount and excluding items not eligible for reimbursement)*a	**C. Recipient Cost** (reimbursable costs that exceed the award amount and items or costs not allowable for reimbursement)**a	**D. Non-recipient Cost***b	**E. Total Project Cost = B+C+D**	**F. Recipient Match Rate = (C+D)/E**
$6,143.75	$6,396.25	$0.00	$12,540.00	51%

Date	By Whom	Activity/Expense	Hours	Value ($)	Cost Category
6.1.15	Lyons Fire	Mitigation of 3 acres for Slattery	n/a	$5,250.00	Actual Cost: reimbursable costs
6.1.15	Lyons Fire	Mitigation of 1 acre for Taetske Defensible Space	n/a	$1,070.00	Actual Cost: reimbursable costs
6.15.15	Lyons Fire	Mitigation of 1.8 acres for Ryan Defensible Space	n/a	$3,150.00	Actual Cost: reimbursable costs
6.30.15	Lyons Fire	Mitigation of 1 acre for Booker Defensible Space	n/a	$2,000.00	Actual Cost: reimbursable costs
6.10.15	Lyons Fire	Mitigation if .61 acres Veltien Defensible Space	n/a	$1,070.00	Actual Cost: reimbursable costs
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	

TOTALS: **G. Cumulative Recipient Cost=** $12,540.00
H. Recipient Cost (Match)= $6,396.25
I. Non-recipient Cost (Match)= $0.00

Grant Recipient Signature: _____ Date: _____

District Forester Signature: _____ Date: _____

*a **Recipient Cost to be reimbursed** includes: contracted services with receipts; recipients's own labor (i.e. landowner labor) to be valued at current volunteer labor rate; labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented; equipment rental with receipts, use of recipient-owned equipment to valued at current market rental rate; cost of supplies with receipts, including consumable items such as bar oil and two cycle fuel, but does not include repairs or other parts, such as chains, sparkplugs, etc.; materials with receipts; materials, if provided by recipient is to be valued at current market price; meeting room rental with receipts; meeting room provided by recipient to be valued at current market price; printing with receipts

Current volunteer labor rate is the current rate at the time of reimbursement request. ***Reimbursement for these costs cannot exceed the obligated amount and must meet the cost share rate. Any recipient costs categorized as "reimbursable" that exceed the obligated award amount can be used as match to an award.***

*a **Recipient Cost designated as match** includes all items list for *a: contracted services with receipts; recipients's own labor to be valued at current volunteer labor rate; labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented; equipment rental with receipts, use of recipient-owned equipment to valued at current market rental rate; cost of supplies with receipts, including items such as bar oil and two cycle fuel; materials with receipts; materials, if provided to valued at current market price; meeting room rental with receipts; meeting room provided by recipient to be valued at current market price; printing with receipts. Additionally, recipient cost designated as match includes items not eligible for reimbursement such as supplies and repairs or other parts (i.e. chains, sparkplugs, etc.)

Current volunteer labor rate is the current rate at the time of reimbursement request. Any recipient costs can be used as match to an award, including recipient costs categorized as "reimbursable" that exceed the obligated award amount, and supplies, materials and equipment categorized as "non-allowable" can be used as matchto an award

*b This includes: volunteers' labor to be valued at current volunteer labor rate; donated materials/supplies to be valued at market value; donated use of equipment to be valued at rental rate; meeting room provided by a third party to be valued at market price.

Non-recipient costs can be used as match to an award and the recipient will not be reimbursed for these costs

Lyons Fire Protection District

INVOICE

P.O. Box 695
Lyons, CO 80540
Phone (303) 823-6611 Fax (303) 823-5568

DATE: July 14, 2015
INVOICE # 20150714-1

BILL TO:
Samuel Booker
1047 Spring Gulch Road
Lyons, CO 80540

FOR:
Wildland fire mitigation
1047 Spring Gulch Road
Lyons, Colorado
NOT FOR FIRE SUPPRESSION

DESCRIPTION	Qty	RATE	AMOUNT
Wildland fire mitigation - 1 acre	1.00	2,000.00	$ 2,000.00
Mitigation, limbing and piling of slash for landowner to remove			
Less Deposit			(500.00)
PAID 7/28/15 ck #1090			
Equipment:			
Materials:			
Other:			
		TOTAL	**$ 1,500.00**

Please make checks payable to **Lyons Fire Protection District.**
Total due in 15 days. Overdue accounts subject to a service charge of 1% per month.

Lyons Fire Protection District

INVOICE

P.O. Box 695
Lyons, CO 80540
Phone (303) 823-6611 Fax (303) 823-5568

DATE: May 27, 2015
INVOICE # 20150527-1

BILL TO:
John Ryan
P.O. Box 937
Lyons, CO 80540

FOR:
Wildland fire mitigation
394 Sandstone Drive
Lyons, Colorado
NOT FOR FIRE SUPPRESSION

DESCRIPTION	Qty	RATE	AMOUNT
Wildland fire mitigation - 1.8 acres	1.80	1,750.00	$ 3,150.00
Mitigation, limbing and piling of slash for burning			
Less Deposit			(300.00)
PAID 6/10/15 CK#121			
Equipment:			
Materials:			
Other:			
		TOTAL	**$ 2,850.00**

Please make checks payable to **Lyons Fire Protection District.**
Total due in 15 days. Overdue accounts subject to a service charge of 1% per month.

Lyons Fire Protection District

INVOICE

P.O. Box 695
Lyons, CO 80540
Phone (303) 823-6611 Fax (303) 823-5568

DATE: May 20, 2015
INVOICE # 20150520-2

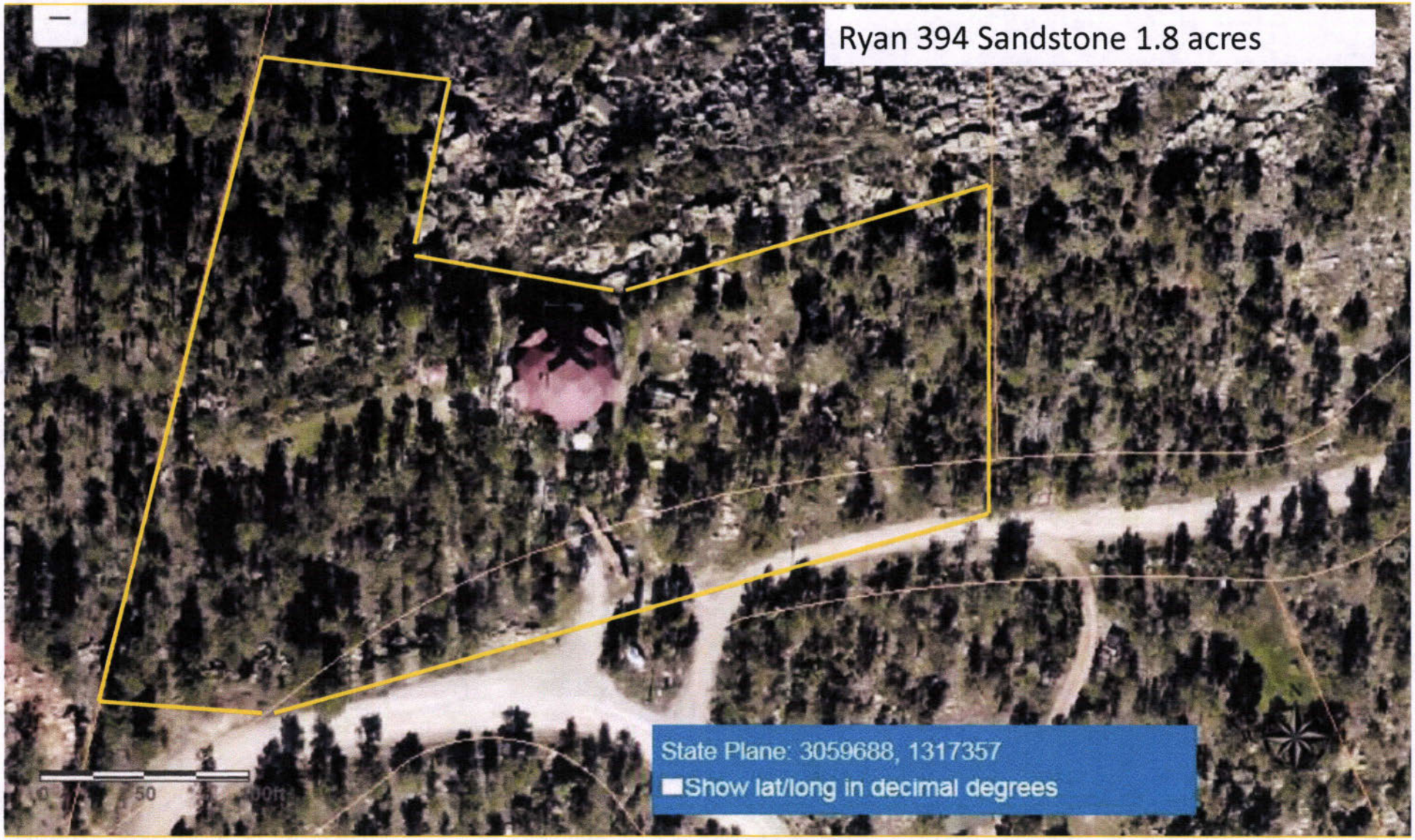
BILL TO:
John Veltien
635 Lake Drive
Lyons, CO 80540

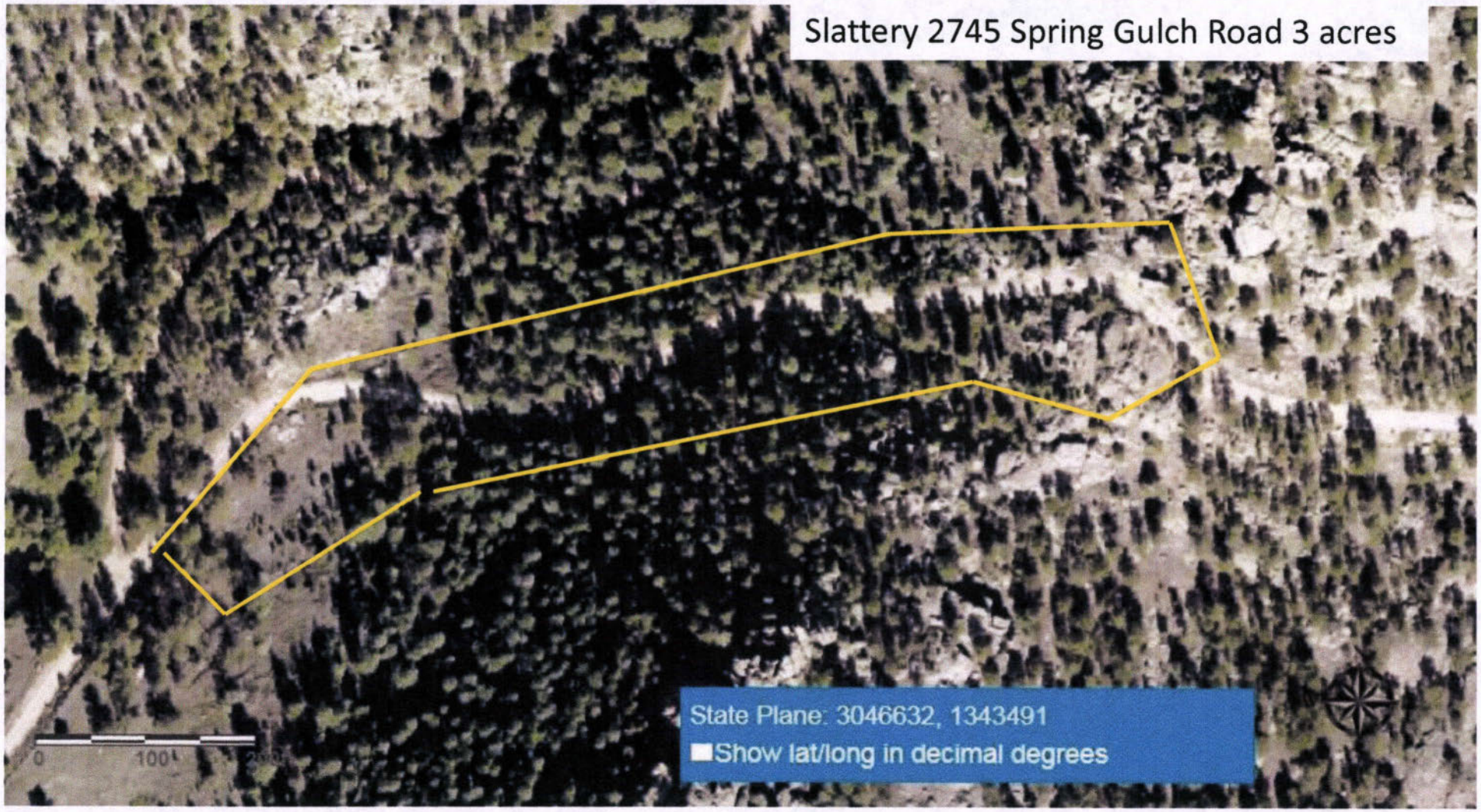
FOR:
Wildland fire mitigation
635 Lake Drive
Lyons, Colorado
NOT FOR FIRE SUPPRESSION

DESCRIPTION	Qty	RATE	AMOUNT
Wildland fire mitigation - 1.5 acres	0.61	1,750.00	$ 1,070.00
Mitigation, limbing, removal of shrubs, and piling of slash for landowner to remove			
Less Deposit			(300.00)
PAID 6/10/15 CK#4057			
Equipment:			
Materials:			
Other:			
		TOTAL	**$ 770.00**

Please make checks payable to **Lyons Fire Protection District.**
Total due in 15 days. Overdue accounts subject to a service charge of 1% per month.

Taetske 635 Lake Drive 1 acre
State Plane: 3055377, 1341773
Show lat/long in decimal degrees
100ft
N
W
E
S


Ryan 394 Sandstone 1.8 acres
State Plane: 3059688, 1317357
Show lat/long in decimal degrees
50


Slattery 2745 Spring Gulch Road 3 acres
State Plane: 3046632, 1343491
Show lat/long in decimal degrees
0
100'

	Projects completed -- Need to Turn in for Re- Imbursment as of 7-6-15						
Project Name	**Acres Trea**	**$875 / acre**		**Total Due From State Grant back to LFPD**			
		Landowner Match					
Slattery	3	$2,625.00	$5,250.00	$2,625.00		2745 Spring Gulch Roa	
Taetske	1	$535.00	$1,070.00	$535.00		635 Lake Drive	
Ryan	1.8	$1,575.00	$3,150.00	$1,575.00		394 Sandstone Drive	
Booker	1	$875.00	$2,000.00	$875.00		1047 Spring Gulch Driv	
Russell	1.8	$1,575.00	3150	$1,575.00		6058 Longmont Dam R	
			$14,620.00	$7,185.00			

Form 828 - Rev. 3/19/14

COPY

Colorado State University

Colorado State Forest Service
Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Bureau of Land Management Task Order Program	
Volunteer or Rural Fire Assistance (VFA/RFA)	
Colorado Forest Restoration Grant	
Insect and Disease Prevention and Suppression Program	
State Fire Assistance (SFA)	X
Front Range Fuels Treatment Partnership (FRFTP)	
Stevens Fuels Treatment Funds (CAFA)	
Emergency Supplemental Funds (ESF)	

☑ Checked for Federal suspension and debarment (State Office) https://www.sam.gov/portal/public/SAM/ 05-07-15 (KO)

Name: Lyons Fire Protection District

Address: ATTN: JJ Hoffman
251 Broadway
PO Box 695
Lyons, CO 80540

Approved for Payment
C.S.F.S.
5922927
05-07-15
(KO)

The above named has submitted a project application that has been reviewed and approved by the Colorado State Forest Service.

Grant Number: 5366960-BO-Lyons FPD

Non-Federal Match: $7,785.00

Approved Funding: $45,000.00

Total Project: $15,570.00

CSFS Account Number: 5366960-6693
('12 CPG SFA CG4 Projects under SFA-Boulder)

Amount of Payment: $7,785.00

Circle one: 1st Payment 2nd Payment 3rd Payment Final Payment

Program Manager Signature _____ Date: 5/7/15

Program Manager Name: Scott M. Woods

Colorado State Forest Service
Colorado State University Fort Collins ~ Colorado 80523-5060 ~ (970) 491-6303 ~ FAX: (970) 491-7736

EXHIBIT B

CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

In order to receive reimbursement, you **must** provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by Form D, receipts for actual costs (out of pocket expenses) incurred by the recipient, and any additional supporting documentation. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and you must show corresponding match.

1. Project/Account #: 5366960 - BO	2. Total Award Amount: $45,000
3. Project Name: Lyons FPD Fire Mitigation Project 2013	4. Reimbursed Amount to Date: $38437.50
5. Make Payment To: Name: Lyons Fire Protection District Attn: JJ Hoffman Address: 251 Boradway, PO Box 695 Lyons, CO 80540	6. Period of Performance (Project Period): From: To:

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of, cubic feet or yards of slash collected, number of presentations, number of plans written, etc., for which the award was granted. Attach additional sheets as necessary.

9.4 acres of hazardous fuels reduction,

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Remaining Award Amount	B. Reimbursement Requested Amount (recipient cost)	C. Match (recipient cost)	D. Match (non-recipient cost)	E. Total Project Cost	F. Recipient Match Rate (%)
				B+C+D	(C+D)/E
$38,437.50	7785	7785		15570	0.5

*** Use results from Form D CSFS Financial Assistance Cost Documentation Worksheet to complete table above. Include Form D, and other approved documentation with Exhibit B to request reimbursement.**

Reimbursement Request: I request reimbursement in the amount of $7,785.00 for the work completed and documented above or attached.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: C. J. [signature] Date: 4/29/2015

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: [signature] ALLEN OWEN Date: 5/1/15

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: [signature] SCOTT WOODS Date: 5/7/15

Rev. November 2013

COPY

EXHIBIT B
CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

In order to receive reimbursement, you **must** provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by Form D, receipts for actual costs (out of pocket expenses) incurred by the recipient, and any additional supporting documentation. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and you must show corresponding match.

1. Project/Account #: 5366960	2. Total Award Amount: $45,000
3. Project Name: Lyons FPD Fire Mitigation Project 2013	4. Reimbursed Amount to Date: $38437.50
5. Make Payment To: Name: Lyons Fire Protection District Attn: JJ Hoffman Address: 251 Boradway, PO Box 695 Lyons, CO 80540	6. Period of Performance (Project Period): From: To:

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of, cubic feet or yards of slash collected, number of presentations, number of plans written, etc., for which the award was granted. Attach additional sheets as necessary.

9.4 acres of hazardous fuels reduction,

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Remaining Award Amount	B. Reimbursement Requested Amount (recipient cost)	C. Match (recipient cost)	D. Match (non-recipient cost)	E. Total Project Cost	F. Recipient Match Rate (%)
				B+C+D	(C+D)/E
$38,437.50	7785	7785		15570	0.5

*** Use results from Form D CSFS Financial Assistance Cost Documentation Worksheet to complete table above. Include Form D, and other approved documentation with Exhibit B to request reimbursement.**

Reimbursement Request: I request reimbursement in the amount of $7,785.00 for the work completed and documented above or attached.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: _____ Date: 4/29/2015

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: _____ Date: 5/1/15

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: _____ Date:

Form D

CSFS Financial Assistance Cost-Share Program Cost Documentation Worksheet

Project/Account #: 5366960

Award Amount (obligated from funding source): $45,000.00

A. Remaining Award Amount: $38,437.50

Reimbursement Request: ☐First ☐Second ☑Third ☐Fourth ☐Fifth ☐Final

	Match			
B. Recipient Cost to be reimbursed (not to exceed the remaining award amount and excluding items not eligible for reimbursement)*a	**C. Recipient Cost** (reimbursable costs that exceed the award amount and items or costs not allowable for reimbursement)**a	**D. Non-recipient Cost***b	**E. Total Project Cost = B+C+D**	**F. Recipient Match Rate = (C+D)/E**
$7,785.00	$7,785.00	$0.00	$15,570.00	50%

Date	By Whom	Activity/Expense	Hours	Value ($)	Cost Category
4.22.2015	Lyons Fire	Mitigation of 3.4 acres for Renoux	n/a	$5,440.00	Actual Cost: reimbursable costs
4.22.2015	Lyons Fire	Mitigation of 2 acres for Longmont Dam Road 4 Landowners	n/a	$3,500.00	Actual Cost: reimbursable costs
4.22.2015	Lyons Fire	Mitigation of 3 acres for Saidel	n/a	$4,880.00	Actual Cost: reimbursable costs
4.22.2015	Lyons Fire	Mitigation of .5 acres for Lutey	n/a	$875.00	Actual Cost: reimbursable costs
4.22.2015	Lyons Fire	Mitigation of .5 acres for Steffy	n/a	$875.00	Actual Cost: reimbursable costs
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	

TOTALS:

G. Cumulative Recipient Cost= $15,570.00

H. Recipient Cost (Match)= $7,785.00

I. Non-recipient Cost (Match)= $0.00

Grant Recipient Signature: _____ Date: 4/20/2015

District Forester Signature: _____ Date: 5/1/15

http://www.bouldercounty.org/doc/landuse/firezone.pdf.

	Projects completed -- Need to Turn into Allen for Re- Imbursment as of 3/18/2015								
Project Name	**Acres Treated**	**$875 / acre**		**Total Due From State Grant back to LFPD**					
		Landowner Match							
Renoux	3.4	$2,975	2720 ~~5950~~	5440 $2,975.00		2057 Spring Gulch Drive			
Saidel	3	$2,625	~~$250~~	4680 $2,625.00		2000 Rowell Drive			
Lutey	0.5	$437.50	875	$437.50		1043 Longmont Dam Road			
Steffy/Everett	0.5	$437.50	875	$437.50		1041 Longmont Dam Road			
Lutey,Weiss, Steffy and Knox	2	$1,750.00	3500	$1,750.00		Road work paid for by 4 landowners			
			16450	$8,225.00					

$ 7,970.00

	Projects completed -- Need to Turn into Allan for Re- Imbursment as of 3/18/2015								
Project Name	**Acres Treated**	**$875 / acre**		**Total Due From State Grant back to LFPD**					
		(2720)							
Renoux	3.4	$2,975		$2,975.00		2057 Spring Gulch Drive			
Saidel	3	$2,625		$2,625.00		2000 Rowell Drive			
Strauss	2.8	2,450.00		$2,450.00		1024 Sandstone			
Lutey	0.5	$437.50		$437.50		1043 Longmont Dam Road			
Steffy/Everett	.5? 0.05	$437.50		$437.50		1041 Longmont Dam Road			
Lutey,Weiss, Steffy and Knox	2	$1,750.00		$1,750.00		Road work paid for by 4 landowners			
	11.75AC	10,675		10,675					

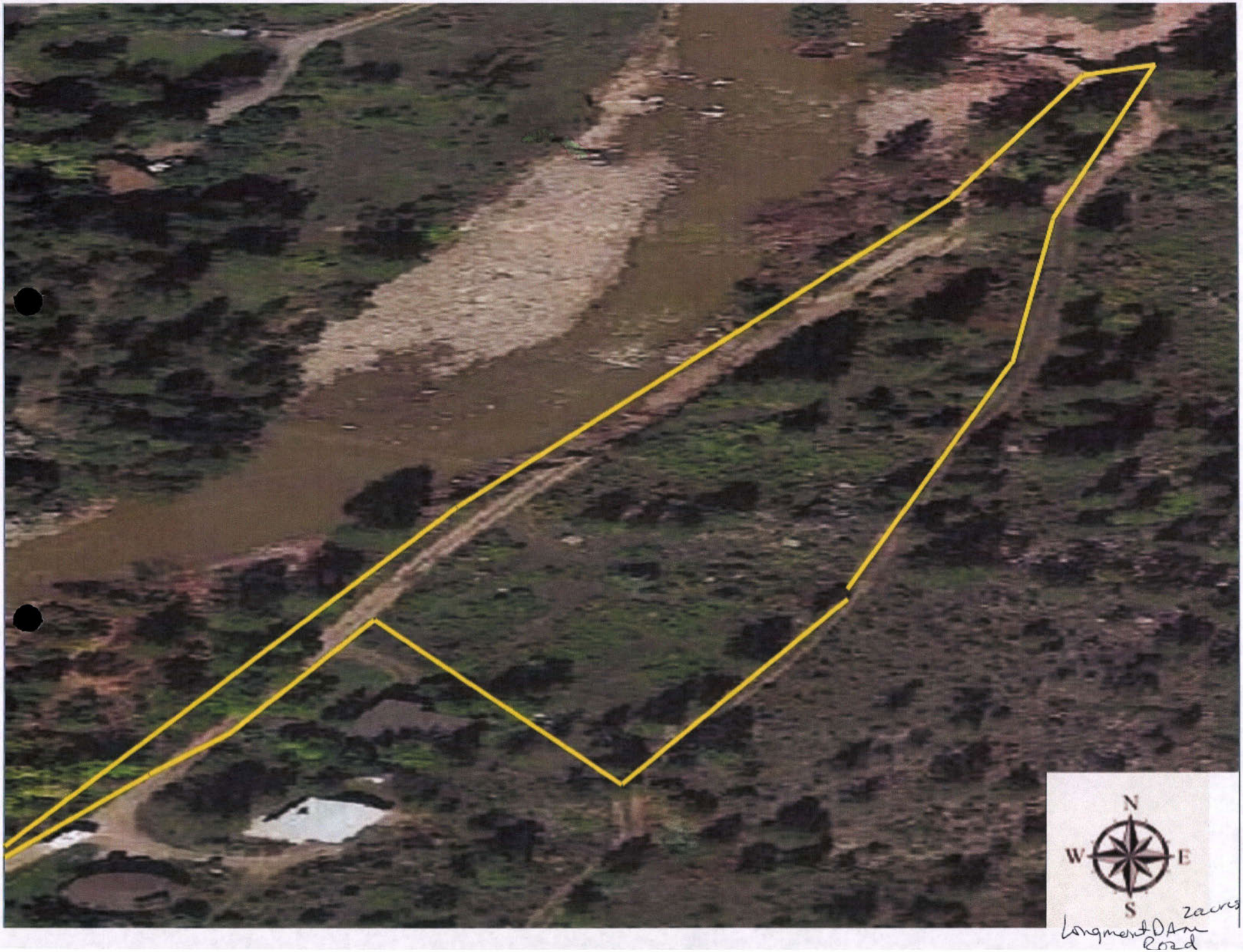
1750/AC

Send 2 Forms - B + D
Request

Steffy .5 Acres

Lutey .5 acres

rs


N
W
E
S
Longmont DAM Road

Form 828 - Rev.12/15/09

Colorado State University

Colorado State Forest Service
Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	
Insect and Disease Prevention and Suppression Program	
State Fire Assistance (a.k.a.: SFA)	X
Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	
Stevens Fuels Treatment Funds	
Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	
Emergency Supplemental Funds (a.k.a.: ESF)	

☑ Checked for Federal suspension and debarment (State Office) http://www.epls.gov/ 01-14-14 (KD)

Name: Lyons FPD

Address: 251 Broadway

P.O. Box 695

Lyons, CO 80540

Attn: JJ Hoffman, Chief

Approved for Payment
C.S.F.S.
2781425
01-15-14
(KD)

The above named has submitted a project application that has been reviewed and approved by the Colorado State Forest Service for funding from Federal Assistance.

Grant Number: 5366960-BO-Lyons FPD

Cooperator Match: $7950.00

Approved Funding: $45,000

Total Project: $15,650.00

CSFS Account Number: 5366960-6693
'12 CPG SFA CG4 Projects under SFA-Boulder

Amount of Payment: $7700.00

Circle one: 1st Payment 2nd Payment 3rd Payment Final Payment

Approved by _____ (Program manager signature) Date: 12/24/2013

1/8/14

Reported 4th Qtr 8.8 Ac

SCOTT WOODS Colorado State Forest Service

Colorado State University Fort Collins ~ Colorado 80523-5060 ~ (970) 491-6303 ~ FAX: (970) 491-7736

EXHIBIT B

CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

In order to receive reimbursement, you **must** provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by Form D, receipts for actual costs (out of pocket expenses) incurred by the recipient, and any additional supporting documentation. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and you must show corresponding match.

1. Project/Account #: 5366960	2. Total Award Amount: $45,000
Lyons Fire Protection District	4. Reimbursed Amount to Date: $1137.50
5. Make Payment To: Lyons Fire Protection District Name: Attn: JJ Hoffman Address: 251 Broadway Lyons, CO 80540	6. Period of Performance (Project Period): From: May 2013 To: December 2013

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of, cubic feet or yards of slash collected, number of presentations, number of plans written, etc., for which the award was granted. Attach additional sheets as necessary.

8.8 Acres-Hazardous Fuels Reduction-Stan Strauss-2.8 ac, Jim Haley & Sue Suskiewich, 6 ac

hwy-

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Remaining Award Amount	B. Reimbursement Requested Amount (recipient cost)	C. Match (recipient cost)	D. Match (non-recipient cost)	E. Total Project Cost	F. Recipient Match Rate (%)
				B+C+D	(C+D)/E
$43,862.50	$7,700.00	$7,950.00	$0.00	$15,650.00	51%

*** Use results from Form D CSFS Financial Assistance Cost Documentation Worksheet to complete table above. Include Form D, and other approved documentation with Exhibit B to request reimbursement.**

Reimbursement Request: I request reimbursement in the amount of $7700.00 for the work completed and documented above or attached.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: _____ Date:

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: _____ Date: 12/20/13

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: _____ Date: 12/24/2013

Form D

CSFS Financial Assistance Cost-Share Program Cost Documentation Worksheet

Project/Account #: 5366960-BO-Lyons FPD

Award Amount (obligated from funding source): $15,000.00

A. Remaining Award Amount: $13,862.50

Reimbursement Request: ☐ First ☑ Second ☐ Third ☐ Fourth ☐ Fifth ☐ Final

	Match			
B. Recipient Cost to be reimbursed (not to exceed the remaining award amount and excluding items not eligible for reimbursement)*a	**C. Recipient Cost** (reimbursable costs that exceed the award amount and items or costs not allowable for reimbursement)**a	**D. Non-recipient Cost***b	**E. Total Project Cost = B+C+D**	**F. Recipient Match Rate = (C+D)/E**
$7,700.00	$7,950.00	$0.00	$15,650.00	51%

Date	By Whom	Activity/Expense	Hours	Value ($)	Cost Category
9/27/2013	LYFPD	Invoice #0927-02		$10,500.00	Salaried Staff: reimbursable costs
11/4/2013	LYFPD	Invoice #1104-01		$5,150.00	Salaried Staff: reimbursable costs
				$0.00	Supplies: non-allowable costs
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	
				$0.00	

TOTALS:
G. Cumulative Recipient Cost= $15,650.00
H. Recipient Cost (Match)= $7,950.00
I. Non-recipient Cost (Match)= $0.00

Grant Recipient Signature: _____ Date: _____

District Forester Signature: _____ Date: 12/20/13

LYONS FIRE PROTECTION DISTRICT

INVOICE

November 4, 2013

To: Stan Strauss
REF- Mitigation Project- 1026 Sandstone Drive

Base Price- include dropping of trees, limbed and bucked as well as slash piles for treatment of fuels for a total price of $1,750 / per acre for 1.8 acres and 1 acre chipping for at $$2,000 per acre for a total of $5,150

ROA- $1,287.50
Total ROA= $ 1,287.50
Total Due- $ 3,862.50

Balance due- $3 ,862.50

Total Due =$ 3,862.50

Paid in Full
J. J. [illegible]
Fire Chief

Please make checks payable to: Lyons Fire Protection District
Memo: Mit Job #1104-01

Thank you for your Business!!

251 Broadway • PO Box 695 • Lyons, CO 80540 • Ph: 303-823-6611 • Fax: 303-823-5568

LYONS FIRE PROTECTION DISTRICT

INVOICE

September 27, 2013

To: Jim Hanley & Sue Suskiewich
REF- Mitigation Project-1221 Longmont Dam Road

Base Price- include dropping of trees, limbed and bucked as well as slash piles for treatment of fuels for a total price of $1,750 / per acre for a total of 6 acres = $ 10,500.00

ROA- $2,625.00
ROA- $ 2,625.00
Total ROA= $ 5,250

Balance due- $ 5,250.00

Paid in Full
J. J. [illegible]
Fire Chief

Total Due =$ 5,250.00

Please make checks payable to: Lyons Fire Protection District
Memo: Mit Job #0927-02

Thank you for your Business!!

251 Broadway • PO Box 695 • Lyons, CO 80540 • Ph; 303-823-6611 • Fax: 303-823-5568

Form 828 - Rev.12/15/09

COPY ✓

Colorado State University

Colorado State Forest Service
Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	
Insect and Disease Prevention and Suppression Program	
State Fire Assistance (a.k.a.: SFA)	X
Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	
Stevens Fuels Treatment Funds	
Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	
Emergency Supplemental Funds (a.k.a.: ESF)	

☑ Checked for Federal suspension and debarment (State Office) http://www.epls.gov/ 05-21-13 (KO)

Name: LYONS FPD - JJ HOFFMAN

Address: PO BOX 695
LYONS, CO 80540

Approved for Payment
C.S.F.S.
2420414
05-22-13
(KO)

The above named has submitted a project application that has been reviewed and approved by the Colorado State Forest Service for funding from Federal Assistance.

Grant Number: 5366960 - BO - Lyons FPD Cooperator Match: ~~$ 1,800.00~~ 1,202.50

Approved Funding: $45,000.00 ~ Total Project: $2,340.00 ~

CSFS Account Number: 5366960 - 6693 ~ Amount of Payment: $ 1,137.50 ~

'12CPG SFA CGY Projects Under SFA - Boulder

Circle one: 1st Payment ~ 2nd Payment 3rd Payment Final Payment

Reported in 3RD QTR NARRATIVE 1,3ac

Approved by _____ Date: 5/21/13
(Program manager signature)

Colorado State Forest Service
Colorado State University Fort Collins ~ Colorado 80523-5060 ~ (970) 491-6303 ~ FAX: (970) 491-7736

EXHIBIT B

CSFS GRANT REPORT/REIMBURSEMENT REQUEST

In order to receive reimbursement, you **must** provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by receipts for actual costs (out of pocket expenses) incurred by the recipient. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and have corresponding match.

1. Project/Account #: 5366960 - 80 - LYONS FPD	2. Total Award Amount: 45,000
3. Project Name: Lyons FPD SFA 2012	4. Reimbursement Amount to Date: 1,137.50
5. Make Payment To: Name: Lyons Fire Protection District Attn: Chief Hoffman Address: P.O. Box 695 Lyons, CO 80540	6. Period of Performance (Project Period): From: Feb 2013 To: April 2013

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of cubic feet or yards of slash collected, number of presentations, number of plans written, etc., for which the award was granted. Attach additional sheets as necessary.

1.3 acres Hazardous Fuel Reduction

8. Reimbursement Request: I request reimbursement in the amount of $1,137.50 for the work completed and documented above.

Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Award Amount	B. Recipient Contribution	C. Non-recipient Contribution	D. Total Contributions	E. Reimbursement Requested Amount	F. Total Match Ratio %
			B + C		E / D
45,000	1,800	0	1,800	1,137.50	63.19%

*** Use results from Exhibit B: Financial Assistance Programs Reimbursement Calculation Worksheet to complete table above. Include Exhibit B: and Form D Cost Documentation or other approved documentation with Exhibit B to request reimbursement.**

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: Fire Date: 5/3/2013

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: Date: 5/13/13

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: Date: 5/21/13

Rev. July 2012

COPY

Exhibit B 1

(Accompanies Exhibit B-CSFS Grant and Cost-Share Program Reimbursement Request)

CSFS Financial Assistance Cost-Share Program Reimbursement Calculation Worksheet*

A. Award amount obligated from funding source (To earn the obligated award amount, the recipient must complete 100% of the deliverables agreed to in the Statement of Work)	B. Recipient Contribution: (AKA: cash; hard match; in-kind/soft match; actual costs) INCLUDES: (contracted services with receipts) (recipients's own labor to be valued at current volunteer labor rate) (labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented) (equipment rental with receipts) (use of recipient-owned equipment to valued at market rental rate) (cost of supplies with receipts: this includes items such as bar oil and two cycle fuel, but does not include repairs or other parts, such as chains, sparkplugs, etc.) (materials with receipts) (materials, if provided to valued at market price) (meeting room rental with receipts) (meeting room provided by recipient to be valued at market price) (printing with receipts) *Current volunteer labor rate is the current rate at the time of reimbursement request. Any recipient contributions can be used as match to an award. Reimbursement for these contributions can not exceed the obligated amount and must meet the cost share rate.*	C. Non-recipient Contribution: (AKA: donated; in-kind/soft match; volunteer) INCLUDES: (volunteers' labor to be valued at current volunteer labor rate) (donated materials/supplies to be valued at market value) (donated use of equipment to be valued at rental rate) (meeting room provided to be valued at market price) While non-recipient contributions can be used as match to an award, the recipient will not be reimbursed for these contributions.	D. Total Contributions (AKA: Total Project Value; Total Project Costs) (B + C)	E. Reimbursement Amount (will be equal to or less than A and must meet the matching requirement)	F. Total Match Ratio (Cost-share rate) (E / D)
~~$0.00~~ 45,000	~~$0.00~~ 1,800	$0.00	1,800 ~~$0.00~~	1,137.50 ~~$0.00~~	#DIV/0!

*Use From D-CSFS Financial Assistance Cost-Share Program Cost Documentation or other approved documentation to support calculations

LYONS FIRE PROTECTION DISTRICT

INVOICE

Job **# 11-0213-013**

February 4, 2013

To: Ed Arling
601 ½ Indian Lookout Road
Lyons Colorado
Phone

Ref: Mitigation on property
Job**# 11-0213-013**
Mitigation Crew- Labor and machine time for limbing and slash piles

Project Dates- 2/13/2013- 2/19/2013

Cost for labor and machines =$1,800 / acre x 1.3 acres =$2,340

Total Cost = $ 2,340

ROA- $585.00

Balance due- $ 1,755.00

Total Due =$1,755.00

Please make checks payable to: Lyons Fire Protection District
Memo: Mit Crew Job **#11-0213-013**

Note* You will receive a reimbursement check from Mitigation funds from Colorado State Forest Service =$1,137.50

Thank you for your Business!!

251 Broadway • PO Box 695 • Lyons, CO 80540 • Ph: 303-823-6611 • Fax: 303-823-5568

Form 828 - Rev.12/15/09

Colorado State University

Colorado State Forest Service
Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	
Insect and Disease Prevention and Suppression Program	
State Fire Assistance (a.k.a.: SFA)	X
Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	
Stevens Fuels Treatment Funds	
Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	
Emergency Supplemental Funds (a.k.a.: ESF)	

☐ Checked for Federal suspension and debarment (State Office) http://www.epls.gov/

Name: LYONS FPD - JJ HOFFMAN

Address: PO BOX 695
LYONS, CO 80540

The above named has submitted a project application that has been reviewed and approved by the Colorado State Forest Service for funding from Federal Assistance.

Grant Number: 5366960

Cooperator Match: $ 1,800.00

Approved Funding: $ 45,000.00

Total Project: $ 2,340.00

CSFS Account Number: 5366960 - 6693

Amount of Payment: $ 1,137.50

Circle one: (1st Payment) 2nd Payment 3rd Payment Final Payment

Approved by _____ Date: _____
(Program manager signature)

Colorado State Forest Service
Colorado State University Fort Collins ~ Colorado 80523-5060 ~ (970) 491-6303 ~ FAX: (970) 491-7736

EXHIBIT B

CSFS GRANT REPORT/REIMBURSEMENT REQUEST

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7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of cubic feet or yards of slash collected, number of presentations, number of plans written, etc., for which the award was granted. Attach additional sheets as necessary.

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			B + C		E / D
45,000	1,800	0	1,800	1,137.50	63.19%

*** Use results from Exhibit B1 Financial Assistance Programs Reimbursement Calculation Worksheet to complete table above. Include Exhibit B1 and Form D Cost Documentation or other approved documentation with Exhibit B to request reimbursement.**

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: Fire Date: 5/3/2013

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: Date: 5/13/13

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: Date:

Exhibit B 1

(Accompanies Exhibit B-CSFS Grant and Cost-Share Program Reimbursement Request)

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$~~0.00~~ 15,000	$~~0.00~~ 1,800	$0.00	1,800 $0.00	1,137.50 $~~0.00~~	#DIV/0!

*Use From D-CSFS Financial Assistance Cost-Share Program Cost Documentation or other approved documentation to support calculations

LYONS FIRE PROTECTION DISTRICT

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Total Cost = $ 2,340

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Balance due- $ 1,755.00

Total Due =$1,755.00

Please make checks payable to: Lyons Fire Protection District
Memo: Mit Crew Job **#11-0213-013**

Note* You will receive a reimbursement check from Mitigation funds from Colorado State Forest Service =$1,137.50

Thank you for your Business!!

251 Broadway • PO Box 695 • Lyons, CO 80540 • Ph: 303-823-6611 • Fax: 303-823-5568