

Georgia State Financing and Investment Commission  
Construction Division  
Request for Reimbursement

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| Name of Requesting Agency / Department / Authority:<br><b>ASU WEST Darton State College</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                           |
| Project Number _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Project Name <b>Student Services Renovation</b>           |
| Bond Issue <b>J-284</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                           |
| Reimbursement Period Covered: From <b>1/1/2017</b> to <b>3/3/2017</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                           |
| Amount Authorized - Commitment Amount                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>S/B 2,344,990.00</b> <del>1,700,000.00</del>           |
| Amount Previously Disbursed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>79,500.00</b> <del>79,500.00</del> <b>472</b>          |
| Balance of Commitment Amount                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>1,620,500.00</b> <del>1,620,500.00</del> <b>802001</b> |
| Amount to be Reimbursed per this Request                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>136,835.00</b> <del>136,835.00</del> <b>15A3</b>       |
| <p>To the best of my knowledge and belief, I hereby certify that all items, units, quantities, prices for work and material shown on this Reimbursement Request are correct; all work has been performed and material supplied in full accordance with the terms and conditions of the applicable contract(s); the work has been accepted by our agency and all invoices for which our agency is requesting payment herein have been paid. I further certify, to the best of my knowledge and belief, the payment(s) herein requested is a proper expenditure of general obligation debt proceeds.</p> <p>Authorized Signature: _____<br/>Date: <b>3/13/2017</b></p> |                                                           |

|                                                               |
|---------------------------------------------------------------|
| Remit Payment to:                                             |
| <b>Darton State College</b>                                   |
| <b>2400 Gillienville Road</b>                                 |
| <b>Albany, GA 31707</b>                                       |
| <div>RECEIVED<br/>ACCOUNTING DEPARTMENT<br/>MAR 16 2017</div> |

|                                                      |
|------------------------------------------------------|
| Agency Contact for this Request                      |
| <b>Stan Brown</b>                                    |
| <b>229-317-6721</b>                                  |
| <b>ACH Payment</b>                                   |
| Please Sign Name and Date                            |
| Reviewed By <b>[Signature]</b> Date <b>3/16/2017</b> |
| Approved By <b>ADV</b> Date <b>3-16-17</b>           |

Business Unit: GSFIC  
Project Name: Student Services Reno-Darton S

| <u>Project</u>                 | <u>Bdg. Per</u> | <u>DeptID</u> | <u>Account</u> | <u>Description</u> | <u>Budget Amount</u> | <u>Expended Amount</u> | <u>Remaining Amount</u> |
|--------------------------------|-----------------|---------------|----------------|--------------------|----------------------|------------------------|-------------------------|
| J_284                          | 2000            | 000472        | 802000         | Contingency        | 2,378,990.00         | 250,335.00             | 2,128,655.00            |
| Total for Project/Grant: J_284 |                 |               |                |                    | 2,378,990.00         | 250,335.00             | 2,128,655.00            |

Project Fund Source Status

| <u>Priority#</u> | <u>Fund Srce</u> | <u>Max FS Amt</u> | <u>FS Spending Amt</u> | <u>FS Remaining Amt</u> |
|------------------|------------------|-------------------|------------------------|-------------------------|
| 1                | 2012A3           | 34,000.00         | 34,000.00              | 0.00                    |
| 2                | 2015A3           | 2,344,990.00      | 216,335.00             | 2,128,655.00            |

End of Report