

Local Government Innovation Program  
Loan Payment Request



Development  
Services Agency

John R. Kasich, Governor

David Goodman, Director

**Loan Information**

Borrower:	
Round Number:	
Project Name:	
Control Number:	
Project Completion Date:	
Contact Name:	
Contact Email:	

**Loan Status and Request**

Invoice Number:	
Total Loan Amount:	
Request Amount:	
Previous Request Total:	
Balance After this Request:	
# of Proof of Payments Attached:	
Total Match:	
Match Expended this Request:	

Loan Progress Status (please briefly detail work that has been completed):	
Projected Loan Activities (please briefly detail any work that is expected to take place prior to the next invoice, if applicable):	
Final Payment?:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Borrower hereby certifies to the Ohio Development Services Agency that: (a) this Payment Request is in accordance with the terms and conditions of the Agreement; (b) the representations and warranties of Borrower set forth in the Agreement are true and correct; (c) no default or Event of Default has occurred and is continuing under the Agreement; (d) each cost for which reimbursement is requested is an allowable cost of the Eligible Loan Project and is necessary for the Eligible Loan Project; (e) no cost for which reimbursement is requested is subject to a duplicative disbursement request; and (f) the data reported above is correct and proper back-up documentation is available or has been submitted.

Date	Signature	Title
State Use Only		
Approved		
Date		

Please email this completed form and all backup documentation to Julia Hinten at [Julia.Hinten@development.ohio.gov](mailto:Julia.Hinten@development.ohio.gov) or mail to:

Ohio Development Services Agency  
Office of Strategic Business/Local Government Innovation Fund  
77 South High Street, 28th Floor  
Columbus, Ohio 43215