

# REQUEST FOR ADVANCE OR REIMBURSEMENT

(See instructions on back)

OMB APPROVAL NO PAGE 1 OF 2 PAGES  
0348-0004

1. TYPE OF PAYMENT REQUESTED

a. "X" one or both boxes  
 ADVANCE     REIMBURSEMENT

b. "X" the applicable box  
 FINAL     PARTIAL

2 BASIS OF REQUEST  
 CASH  
 ACCRUAL

3 FEDERAL SPONSORING AGENCY AND ORGANIZATIONAL ELEMENT TO WHICH THIS REPORT IS SUBMITTED  
**US Department of the Interior/National Park Service**

4 FEDERAL GRANT OR OTHER IDENTIFYING NUMBER ASSIGNED BY FEDERAL AGENCY  
**Cooperative Agreement # P13AC00948**

5 PARTIAL PAYMENT REQUEST NUMBER FOR THIS REQUEST  
**3**

6 EMPLOYER IDENTIFICATION NUMBER  
**85-6000073**

7 RECIPIENT'S ACCOUNT NUMBER OR IDENTIFYING NUMBER

8. PERIOD COVERED BY THIS REQUEST

FROM (month, day, year) **04/01/2015** TO (month, day, year) **6/31/2015**

9 RECIPIENT ORGANIZATION

Name:  
**Santa Fe County**  
 Number and Street:  
**PO Box 276**  
 City, State and ZIP Code:  
**Santa Fe, NM 87504**

10. PAYEE (Where check is to be sent if different than item 9)

Name:  
 Number and Street:  
 City, State and ZIP Code:

**11. COMPUTATION OF AMOUNT OF REIMBURSEMENTS/ADVANCES REQUESTED**

PROGRAMS/FUNCTIONS/ACTIVITIES ☉	(a) Wayside Exhibits	(b) Trail Pedestrian Road Signing	(c) Shipping	TOTAL
a. Total program outlays to date (As of date)	\$ 20,608.77	\$	\$	\$ 20,608.77
b. Less: Cumulative program income				
c. Net program outlays (Line a minus line b)	20,608.77			20,608.77
d. Estimated net cash outlays for advance period				
e. Total (Sum of lines c & d)	20,608.77			20,608.77
f. Non-Federal share of amount on line e				
g. Federal share of amount on line e	20,608.77			20,608.77
h. Federal payments previously requested	9,126.88			9,126.88
i. Federal share now requested (Line g minus line h)	11,481.89			11,481.89
j. Advances required by month, when requested by Federal grantor agency for use in making prescheduled advances	1st month			
	2nd month			
	3rd month			

**12. ALTERNATE COMPUTATION FOR ADVANCES ONLY**

a. Estimated Federal cash outlays that will be made during period covered by the advance	\$
b. Less: Estimated balance of Federal cash on hand as of beginning of advance period	
c. Amount requested (Line a minus line b)	\$

**CERTIFICATION**

I certify that to the best of my knowledge and belief the data on the reverse are correct and that all outlays were made in accordance with the grant conditions or other agreement and that payment is due and has not been previously requested.	SIGNATURE OR AUTHORIZED CERTIFYING OFFICIAL 	DATE REQUEST SUBMITTED 8-11-2015
	TYPED OR PRINTED NAME AND TITLE Katherine Miller, County Manager	TELEPHONE (AREA CODE, NUMBER, EXTENSION) 505-986-6200

This space for agency use

*Suzanne Harwood for*  
*X Carole*

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0004), Washington, DC 20503.

**PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.**

**INSTRUCTIONS**

Please type or print legibly. Items 1, 3, 5, 9, 10, 11e, 11f, 11g, 11i, 12 and 13 are self-explanatory; specific instructions for other items are as follows:

Item	Entry	Item	Entry
2	Indicate whether request is prepared on cash or accrued expenditure basis. All requests for advances shall be prepared on a cash basis.		as many additional forms as needed and indicate page number in space provided in upper right; however, the summary totals of all programs, functions, or activities should be shown in the "total" column on the first page.
4	Enter the Federal grant number, or other identifying number assigned by the Federal sponsoring agency. If the advance or reimbursement is for more than one grant or other agreement, insert N/A; then, show the aggregate amounts. On a separate sheet, list each grant or agreement number and the Federal share of outlays made against the grant or agreement.	11a	Enter in "as of date," the month, day, and year of the ending of the accounting period to which this amount applies. Enter program outlays to date (net of refunds, rebates, and discounts), in the appropriate columns. For requests prepared on a cash basis, outlays are the sum of actual cash disbursements for goods and services, the amount of indirect expenses charged, the value of in-kind contributions applied, and the amount of cash advances and payments made to subcontractors and subrecipients. For requests prepared on an accrued expenditure basis, outlays are the sum of the actual cash disbursements, the amount of indirect expenses incurred, and the net increase (or decrease) in the amounts owed by the recipient for goods and other property received and for services performed by employees, contracts, subgrantees and other payees.
6	Enter the employer identification number assigned by the U.S. Internal Revenue Service, or the FICE (institution) code if requested by the Federal agency.	11b	Enter the cumulative cash income received to date, if requests are prepared on a cash basis. For requests prepared on an accrued expenditure basis, enter the cumulative income earned to date. Under either basis, enter only the amount applicable to program income that was required to be used for the project or program by the terms of the grant or other agreement.
7	This space is reserved for an account number or other identifying number that may be assigned by the recipient.	11d	Only when making requests for advance payments, enter the total estimated amount of cash outlays that will be made during the period covered by the advance.
8	Enter the month, day, and year for the beginning and ending of the period covered in this request. If the request is for an advance or for both an advance and reimbursement, show the period that the advance will cover. If the request is for reimbursement, show the period for which the reimbursement is requested.	13	Complete the certification before submitting this request.
Note: The Federal sponsoring agencies have the option of requiring recipients to complete items 11 or 12, but not both. Item 12 should be used when only a minimum amount of information is needed to make an advance and outlay information contained in item 11 can be obtained in a timely manner from other reports.			
11	The purpose of the vertical columns (a), (b), and (c) is to provide space for separate cost breakdowns when a project has been planned and budgeted by program, function, or activity. If additional columns are needed, use		

**El Camino Real de Tierra Adentro Wayside Exhibits Grant  
 Task Agreement No. P13AC00949 Budget  
 Request #3**

**Wayside Exhibits**

	<b>Design of 5 Exhibits \$14,000, Fabrication &amp; Install of bases \$4,000, Fabrication &amp; Installation \$2,000, Images &amp; Illustrations \$500, and Project Management \$500.00</b>	
	<b>\$</b>	<b>21,000.00</b>
Request #1	\$	2,281.72
Request #2	\$	6,845.16
Request #3	\$	11,481.89
Total Expended	\$	20,608.77
Total Remaining	\$	391.23

**National Historic Trail Pedestrian and Road Signing**

	<b>6-10 Road Signs (\$160 each); 2 Site ID signs (\$300), 2-4 standard metal pedestrian distance signs for trail head (\$100 each); 14 Carsonite posts (\$12 @ 2 per 1/4)mile</b>	
	<b>\$</b>	<b>3,000.00</b>
Total Expended	\$	-
Total Remaining	\$	3,000.00

**Shipping**

	<b>Shipping</b>	
	<b>\$</b>	<b>710.00</b>
Total Expended	\$	-
Total Remaining	\$	710.00
<b>Total Grant</b>	<b>\$</b>	<b>24,710.00</b>
<b>Expenditures</b>	<b>\$</b>	<b>20,608.77</b>
<b>Remaing Amount</b>	<b>\$</b>	<b>4,101.23</b>

**Quarterly Progress Report #7**

El Camino Real de Tierra Adentro National Historic Trail

April 1, 2015 – June 30, 2015

**Project Name:** El Camino Real de Tierra Adentro NHT – Santa Fe County exhibit project

**Agreement Number:** P13AC00949 - Santa Fe County

**Project Contact:** Colleen Baker \_\_\_\_\_

**Project Contact Address:** P.O. Box 276, Santa Fe, NM 87501 \_\_\_\_\_

**Project Contact Phone Number:** (505) 992-9868 \_\_\_\_\_

**Reporting Date:** 7/20/15 \_\_\_\_\_

**% of Project Completed:** 98% \_\_\_\_\_

**Description of project accomplishments to date:**

Santa Fe County received approval from the City of Santa Fe for the installation of the signs in its jurisdiction on 4/24/15. Santa Fe County's consultant, Conservation by Design, submitted the wayside design to the fabricator on 4/24/15. The consultant completed installation of the wayside exhibits on 6/25/15. The County is in the process of ordering the road and pedestrian signs.

**Submit by mail or email to:**

Trish Fresquez-Hernandez, National Park Service

P. O. Box 728, 1100 Old Santa Fe Trail, Santa Fe, New Mexico 87504

505-988-6122 (office), trish\_fresquez-hernandez@nps.gov

**SANTA FE COUNTY**

VENDOR

22329

CONSERVATION BY DESIGN



WARRANT

NUMBER

DATE

483132

INVOICE NO.

/DATE

P.O. NUMBER

ACCOUNT

AMOUNT

JOB#425

06/25/2015

156700

30571204818010

7,911.89

*Please make a copy  
of the warrant  
and let me know  
when it is ready  
to pick up.  
Thanks!  
Colleen  
9868*

4m 986 887 2561 11/20/10

7,911.89

THE FACE OF THIS DOCUMENT WAS REPRODUCED FROM OVERHEAD OR WHITE PAPER

**SANTA FE COUNTY**  
P.O. BOX 276  
SANTA FE, NEW MEXICO 87504-0276  
(505) 986-8375

LOS ALAMOS NATIONAL BANK  
301 GRIFFIN ST  
SANTA FE, NM 87504  
(505) 988-5111  
99-1011070

483132

VOID ONE YEAR AFTER DATE ISSUED	
WARRANT DATE	WARRANT NO
07/09/2015	483132

THIS AMOUNT

AMOUNT

SEVEN THOUSAND NINE HUNDRED ELEVEN AND 89/100 DOLLARS \*\*\*\*\*

\$\*\*\*\*7,911.89

CONSERVATION BY DESIGN  
1811 N GEORGIA ST  
SILVER CITY NM 88061

CHAIRMAN BOARD OF  
COUNTY COMMISSIONERS

ATTEST / COUNTY  
CLERK

# Conservation By Design

Melanie M. Pierson  
TIN# 20-4730020  
DUNS# 602459856  
1811 N. Georgia St., Silver City, NM 88061  
P.O. Box 3014, Silver City, NM 88062  
Studio (575) 534-0933  
Fax (575) 534-0869  
Mobile (575) 313-2203  
[conservationbydesign@mac.com](mailto:conservationbydesign@mac.com)

**RECEIVED**  
JUN 29 2015  
BY: \_\_\_\_\_

# INVOICE

JOB #425  
DATE: JUNE 25, 2015

**TO:**  
Colleen Baker  
Project Manager  
Public Works Department, Capital Projects Division  
Santa Fe County  
(505) 992-9868  
[cbaker@santafecountynm.gov](mailto:cbaker@santafecountynm.gov)

**FOR:**  
El Camino Real de Tierra Adentro NHT Wayside Exhibits  
(FINAL INVOICE)

DESCRIPTION	AMOUNT
<b>100% Fabrication Complete – El Camino Real de Tierra Adentro NHT Wayside Exhibits</b> (Remaining 50% of Fabrication fee)	\$3,570.00
<b>Installation – El Camino Real de Tierra Adentro NHT Wayside Exhibits</b>	\$4,029.60
<b>GRT on Installation</b>	\$312.29
<b>TOTAL DUE</b>	<b>\$7,911.89</b>

## ORIGINAL IS-

LOST-   
FAXED -   
EMAILED-

Santa Fe County Approval For Payment
Pay Per Invoice Certification is Made that Services/Materials have been Received and Meet specifications
Buyer: _____
Date: _____
Requester: <u>Colleen Baker</u>
Date: <u>7/16/15</u>
If Not Acceptable - Document Reason

CB

# SANTA FE COUNTY

VENDOR

22329

CONSERVATION BY DESIGN



NUMBER  
482476

DATE

## WARRANT

INVOICE NO.	/DATE	P.O. NUMBER	ACCOUNT	AMOUNT
JOB#424	05/21/2015	145366	30591204818011	3,570.00

*Please make a  
copy of the warrant.  
Call me at 9868  
when it is ready  
for pick up.  
Thank you!  
Collector*

3,570.00

### SANTA FE COUNTY

P.O. BOX 278  
SANTA FE, NEW MEXICO 87504-0278  
(505) 956-6375

### LOS ALAMOS NATIONAL BANK

301 GRIFFIN ST  
SANTA FE, NM 87504  
(505) 662-5171  
95-1011070

482476

VOID ONE YEAR AFTER DATE ISSUED	
WARRANT DATE	WARRANT NO.
05/17/2015	482476

PAY THIS AMOUNT

AMOUNT

\*\*\*\*\*3,570.00

THREE THOUSAND FIVE HUNDRED SEVENTY AND 00/100 DOLLARS \*\*\*\*\*

CONSERVATION BY DESIGN  
1811 N GEORGIA ST  
SILVER CITY NM 88061

CHAIRMAN BOARD OF  
COUNTY COMMISSIONERS

ATTEST / COUNTY  
CLERK

SECURITY FEATURES INCLUDED. DETAILS ON BACK

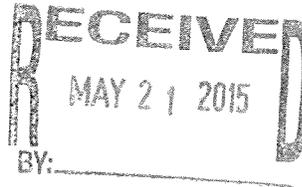
482476

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# Conservation By Design

Melanie M. Pierson  
TIN# 20-4730020  
DUNS# 602459856  
1811 N. Georgia St., Silver City, NM 88061  
P.O. Box 3014, Silver City, NM 88062  
Studio (575) 534-0933  
Fax (575) 534-0869  
Mobile (575) 313-2203  
[conservationbydesign@mac.com](mailto:conservationbydesign@mac.com)



# INVOICE

JOB #424  
DATE: MAY 21, 2015

**TO:**

Colleen Baker  
Project Manager  
Public Works Department, Projects Division  
Santa Fe County  
(505) 992-9868  
[cbaker@santafecounty.org](mailto:cbaker@santafecounty.org)

**FOR:**

El Camino Real de Tierra Adentro NHT Wayside Exhibits  
(PARTIAL INVOICE)

DESCRIPTION	AMOUNT
50% Fabrication Complete – El Camino Real de Tierra Adentro NHT Wayside Exhibits (50% of Fabrication fee)	\$3,570.00
<b>TOTAL DUE</b>	\$3,570.00

Santa Fe County  
Approval For Payment

Pay Per Invoice. Certification Is Made  
that Services/Materials have been  
Received and Meet specifications.

Buyer: \_\_\_\_\_  
Date: \_\_\_\_\_  
Requester: Colleen Baker  
Date: 5/21/15

If Not Acceptable - Document Reason

\_\_\_\_\_

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