THIS IS A SAMPLE

DEPARTMENT OF TRANSPORTATION - FEDERAL AVIATION ADMINISTRATION

OMB NO. 80-R0183

REQUEST FOR ADVANCE OR REIMBURSEMENT

1. Federal Agency and Organizational Element: FAA, NEW ENGLAND REGION

2. Federal Grant No. or Other Identifying No.: A-BC-DFGH-IJ70-KL-M

3. Type of Payment Requested
   a. [ ] Advance
   [X] Reimbursement
   b. [ ] Final
   [X] Partial

4. Basis of Report
   [ ] Cash
   [X] Accrued Expenditures

5. Partial Payment Request No.: #1

6. Employer Identification No.: ~~SS-QRPV~~

7. Grantee Account No. or Identifying No.: FA-NE-70-XYZ

8. Period Covered (Month, Day, Year)
   FROM 06 | 30 | 70
   TO 01 | 30 | 87

9. Name of Grantee Organization
   AIRPORT AUTHORITY
   STREET NO. AND NAME
   5 AIRPORT ROAD
   CITY STATE ZIP CODE
   ANYWHERE, U.S.A.

10. Name of Payee (If different than Item 9)
   SAME
   STREET NO. AND NAME
   CITY STATE ZIP CODE

11. COMPUTATION OF AMOUNT REQUESTED

	PROGRAMS — FUNCTIONS — ACTIVITIES (1)	(2)	(3)	TOTAL
a. Total program outlays to date as of _____	$ 68,500	$	$	$68,500
b. Less: Cumulative program income	0			0
c. Net program outlays	68,500			68,500
d. Estimated net cash outlays for advance period	0			0
e. Total of Lines c and d	68,500			68,500
f. Non-Federal share of amount on Line e	6,850*			6,850
g. Federal share of amount on Line e	61,650			61,650
h. Federal payments previously ~~requested~~ REIMBURSED **	0			0
i. Federal share now requested	61,650			61,650
j. Monthly advance requirements: (1) 1st month				
(2) 2nd month				
(3) 3rd month				

12. REMARKS (Attach additional sheets if necessary)

* THIS FIGURE SHOULD ONLY REFLECT 10 PERCENT OF TOTAL OUTLAYS.

** THIS FIGURE SHOULD BE ACTUAL REIMBURSED AMOUNT.

13. I certify that to the best of my knowledge and belief the data reported above is correct and that all outlays were made in accordance with grant conditions and that payment is due and has not been previously requested.

Name	Title	TELEPHONE Area Code	Number	Ext.

Signature of Authorized Official

Date Report Is Submitted

FOR AGENCY USE ONLY

FAA Form 5100-61 (6-73) SUPERSEDES FAA FORM 5100-6 AND 5900-2