St. Louis County, MN

ST. LOUIS COUNTY, MINNESOTA

Payment Request

HUD Entitlement Programs – CDBG, ESG Quad City Food Shelf

Form **1003A**

Rev. 10-29-2024

This form is used to request payment and data collection reporting for **AEOA Quad City Food Shelf**. You must complete the **Data Collection Form** on page 2. **Infrastructure** and **Community Facility Projects** should use **Form 1004**. **Housing Projects** should use **Form 1005**.
More Information: www.stlouiscountymn.gov/communitydevelopment

Request Information

Date:	Organization Fund/Invoice Number (Optional):
Project Name: Quad City Food Shelf	
Organization Name: AEOA – Quad City Food Shelf	Contact Person:
Mailing Address:	
Phone:	Email:

Funding Source (Check One) ☐ CDBG ☐ ESG	Project Year:	Request Period:
Percentage of Completion: %		Request for reimbursement of eligible costs totaling: $

SLC Grant Award	Previous Request	Current Request	Total Request to Date	Balance Remaining
$	$	$	$	$

Narrative (Accomplishments/Status of Project during the reporting period):

Attestation

I hereby certify and attest that the above-submitted costs are true and correct, that the accompanying documents are valid, that the services described therein were duly rendered, and that the work, for which payment is requested, was performed in accordance with the terms of the CDBG Subrecipient Agreement with the County of St. Louis.

Authorized Recipient Name:	Title:	Date:

Contact Economic and Community Development

Duluth Office		Virginia Office	
Government Services Center 320 W 2nd Street, Suite 301 Duluth, MN 55802	Phone (218) 733-2755 Toll-Free (800) 450-9777 www.stlouiscountymn.gov/communitydevelopment	Government Services Center 201 South 3rd Avenue West Virginia, MN 55792	Phone (218) 733-2755 Toll-Free (800) 450-9777 www.stlouiscountymn.gov/communitydevelopment

Office Use Only

Date Received:	St Louis County Contract Number:
☐ Approved to process payment request	IDIS Number:
☐ On HOLD reason:	
Approver:	Date:

Data Collection Form	
Organization Name: Quad City Food Shelf	Project Name: Quad City Food Shelf

Households Served and Racial/Ethnicity Characteristics: (Complete the columns below using numbers, NOT percentages)	
Households Served	**# Number**
Number of Extremely Low Income Served (0-30%)	
Number of Low Income Served (31-50%)	
Number of Moderate Income Served (51-80%)	
Number of Non-Low/Moderate Income Served (over 80%)	
Total Number Served**	

Female Head of Household	
Total	

Racial/Ethnic Categories	**# Total**	**# Hispanic ***
White		
Black or African-American		
Asian		
American Indian or Alaskan Native		
Native Hawaiian or Other Pacific Islander		
American Indian or Alaskan Native and White		
Asian and White		
Black or African-American and White		
American Indian or Alaskan Native and Black or African-American		
Other Multi-Racial		
Total**		

* # Hispanic – Please count how many are Hispanic AND listed rows racial category.
** Total Persons Served Must Equal Total of Racial Categories.