

This form should be printed after completion, routed for Authorized Signature and sent to TWDB at [outlays@twdb.texas.gov](mailto:outlays@twdb.texas.gov) in PDF format

Enter Current Outlay Request #

Entity XYZ

Outlay Request #

Project #: 12345

Time Period Covered (This Outlay)

Total Commitment Cost

Enter Report Beginning Date From:  To:  Enter Report Ending Date

\$830,000.00

Requested Amount: \$  No Entry Required (Autosum may not apply to older workbooks)

IUP Year: 2023 (Required for SRF Programs)

Is this the final Request?  Yes  No

Check the appropriate box

Program	Commitment #	Expiration Date	Commitment Date	Closing Date	Amount
DWSRF	L123456	11/30/24	11/09/23	02/27/24	\$830,000.00
TOTAL					\$ 830,000.00

Entity:	Entity XYZ
Entity Address:	123 Texas Avn.
City, State, ZIP:	Entity, TX 78701

Contact:	Enter the Project Contact Person and their information here - please be sure to update this information as needed
Contact Title:	
Contact Phone:	
Contact Fax:	
Contact Email:	

Outlay Contact:	Enter the Outlay Contact Person and their information here - please be sure to update this information as needed
Outlay Contact Title:	
Outlay Contact Phone:	
Outlay Contact Fax:	
Outlay Contact Email:	

**Certification:** I certify that, to the best of my knowledge and belief, the billed costs listed above (or attached) are in accordance with the above-mentioned contract(s) and all work performed, including any overnight travel claimed, are in accordance with said contract(s). I also confirm that any travel-related expenses have complied with the State of Texas Comptroller's published allowable limits and are subject to verification.

<b>Signature of an Authorized Representative is REQUIRED</b>		<b>Enter the date signed</b>	
_____ Signature and Title of Authorized Representative		_____ Date Signed	
<b>Print or Type the Authorized Representative's Name and Title here</b>		<b>Enter the phone number of the person signing</b>	
_____ Print or Type Name and Title of Representative Signing		_____ Telephone Number	