LAND AND WATER CONSERVATION FUND (LWCF)

DATA SHEET SUMMARIZING EMPLOYEE LABOR

**PROJECT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROJECT NO.­­­­­­­­­­­­­­­­­ \_\_\_\_\_\_\_\_\_\_\_\_\_ ­­­­**

**DRAWDOWN NO.­­­­­­­­­­­­­­­­­ \_\_\_\_\_\_\_\_\_\_**

| **Period Covered** | **Employee Name** | **Description of Work** | **Hourly Rate** | **Number of Hours** | **Total Amount** | **Check Number, Transaction Authorization Number, Trace Number** |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  | **Total** |  |  |

**Employee and Supervisor-signed timesheet/s and rate of pay documentation must accompany this log.**

CERTIFICATION: I certify, to the best of knowledge and belief, the billed costs for this drawdown request are in accordance with the terms of the LWCF project agreement and that the drawdown represents the reimbursement share due, which has not been previously requested, and that an inspection has been performed and all work is in accordance with the terms of the grant. In addition, I certify compliance with applicable federal and state regulations including, but not limited to, the Cost Principles (Subpart E) 2 C.F.R., part 200 as well as other Federal, State and Local Laws and Regulations, Virginia SWaM requirements, the construction provisions for federal-aid projects as detailed in the National Park Service (NPS) LWCF Financial Assistance Manual (Volume 72).

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_