









Riviera Beach CRA Payment Authorization Checklist

Vendor Name: **DANA NOTTINGHAM** _____

Control No.: **2018-02** _____ Invoice No.: **10.01.18-01** _____

Invoice Date: **OCTOBER 3, 2018** _____ Payment Amount: **\$8,600.00** _____

Project Supervisor/Responsible Official: **SCOTT EVANS**

| | Reviewed/Approved by |
|---|---|
| <input checked="" type="checkbox"/> Project "scope of work and deliverables" reviewed? |  |
| <input checked="" type="checkbox"/> Payment support documentation appropriate based on work scope? |  |
| <input checked="" type="checkbox"/> Deliverables due with this invoice have been received? |  |
| <input type="checkbox"/> If final payment, have all deliverables been received? |  |
| <input checked="" type="checkbox"/> Amount of payment is in agreement with payment schedule or is appropriate and is within the limits of the total agreement amount, on a cumulative amount basis? |  |
| <input checked="" type="checkbox"/> Expense reimbursement amounts meet Agency guidelines or amounts approved by the agreement. |  |
| <input checked="" type="checkbox"/> The nature of work being performed is within the scope of the CRA plan. |  |
| <input checked="" type="checkbox"/> Funds for payment have been budgeted and are available from the appropriate source(s) for payment. |  |

The invoice and supporting documentation have been reviewed and it is approved for payment.

 _____ Date: 11/6/2018

Approving Authority

Payment approved by the Board of Commissioners by:

Motion No. **RES 2018-02** _____

or the Consent Agenda, at its meeting on **JANUARY 24, 2018**. (If applicable)

**RIVIERA BEACH COMMUNITY REDEVELOPMENT AGENCY
PAYMENT REQUISITION FORM**

TODAYS DATE: 10/3/2018
 VENDOR NAME: DANA NOTTINGHAM
 VENDOR #: 12138
 INVOICE #: 10.01.18-01
 INVOICE DATE: 10/3/2018
 PO #: _____

| | |
|---|----------|
| | BCP |
| | C & S |
| | CDE |
| X | CRA |
| | MEC |
| | MV |
| | RBEC,LLC |

| FUND ACCOUNT NUMBER | DESCRIPTION | JOB | AMOUNT |
|-------------------------------------|---|-----|-------------------|
| 811-50-5015-559-55 - 0000-531000 | MARINA VILLAGE ADVISORY SERVICES-10/1/18-10/31/18 | | \$ 8,600.00 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| INVOICE TOTAL | | | \$8,600.00 |

COMMENTS: *PER S EVANS-2 SEPARATE CHECKS*
 APPROVED BY: 

CRA POLICY ON PURCHASES LESS THAN \$2,500 REQUIRES THAT THE PURCHASE PRICE IS "FAIR AND REASONABLE." IF COMPETITIVE QUOTES ARE REQUIRED, PLEASE COMPLETE SECTION C AND SUBMIT QUOTES WITH INVOICE. IF UNDER \$2500 PLEASE COMPLETE SECTION A OR B BELOW.

SECTION A - CERTIFICATION
 PLEASE ANNOTATE BELOW HOW YOU DETERMINED THAT THE PRICE IS FAIR AND REASONABLE; EXAMPLES INCLUDE: PROFESSIONAL MARKET EXPERIENCE, MARKET TREND, PREVIOUS PURCHASE, CATALOG PRICE, ADVERTISING PUBLICATIONS, ETC.
 I HAVE DETERMINED THAT THE PRICE IS FAIR AND REASONABLE. MY REASONS INCLUDE:

SECTION B - OTHER PROFESSIONAL SERVICE AGREEMENT

SECTION C - QUOTES

| VENDOR | PRICE QUOTED | COMMENT / RANKING |
|--------|--------------|-------------------|
| 1 | | |
| 2 | | |
| 3 | | |

RECEIVED BY FINANCE: _____
 ENTERED IN FMS / ADG: _____
 DATE MAILED: _____

DANA A. NOTTINGHAM
Urban Development Advisor
860 Johnson Ferry Road
Suite 140-253
Atlanta, Ga 30342

OCTOBER INVOICE

Project: Marina Village
Advisory Services

Date: October 3, 2018
Invoice: 10.01.18 - 1
Period: (10/1/18 thru 10/31/18)

| <u>Services Provided</u> | <u>Amount Due</u> |
|--|--------------------------|
| Base Advisory Services | \$8,600.00 |
| RFP Analysis, Tech Review Committee, Evaluation Committee and Board | |
| Total | <u>\$8,600.00</u> |

Check payable to:

Dana A. Nottingham

OVENIGHT MAIL TO:

Dana A. Nottingham
7211 Ivy Bank Rd.
Laurel, MD 20707