



STATE OF ARKANSAS  
**Department of Finance  
and Administration**

**Office of Intergovernmental Services**

1515 West Seventh Street, Suite 400

Post Office Box 8031

Little Rock, Arkansas, 72203-8031

Phone: (501) 682-1074

Fax: (501) 682-5206

<https://www.dfa.arkansas.gov/intergovernmental-services>

## **CERTIFICATION OF EXPENDITURE COMPLIANCE**

I, \_\_\_\_\_, do hereby certify that my agency representatives and I will submit all required expenditure documentation for monies spent under the LLEBG Grant (receipts, invoices etc.) to the Department of Finance and Administration\Intergovernmental Services on or before 15 days after the project end date. We agree to comply with all grant requirements to fully utilize our Local Law Enforcement Block Grant (LLEBG) for the purposes outlined in our approved budget. We understand that failure to comply with this agreement will result in disqualification of my agency in obtaining future awards and will require reimbursement of funds spent.

\_\_\_\_\_  
Signature of Authorized Official

\_\_\_\_\_  
Printed Name\Title of Authorized Official

\_\_\_\_\_  
Date