

WORKSHEET FOR DOCUMENTING MOE FOR NONPOINT SOURCE PROGRAM
SECTION 319(h) GRANTS
(Submit to EPA with New Applications and Final FSRs)

GRANTEE: _____

CONTACT PERSON: _____ PHONE: _____

GRANT NO: _____ MOE REQUIRED: \$ _____

GRANT PERIOD: _____ THROUGH _____

Agency or Division and Description	Actual Expenditures			
	Period 1	Period 2	Period 3	Period 4
Totals				

I certify to the best of my knowledge and belief that the above information is correct and that the _____ is meeting its Maintenance of Effort requirement for the Nonpoint (State) Source, Section 319(h) Program.

OFFICIAL AUTHORIZED CERTIFYING

Typed or Printed Name

Signature

Date

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