



REQUEST FORM

HOST – FY 2017 Supplementary Budgets

(Must be submitted no later than 15 March 2016)

Name of Community: Rochester Date: 3/10/16

PART I. MAINTENANCE OF FACILITIES REQUEST(S)	REP Percentage of Total Cost	
Maintenance of facilities (rent, trash removal, electric bills, etc.)	_____ %	\$ 0
NOTES:		
SUBTOTAL FOR PART I = \$ 0		

PART II. PURCHASE OF EQUIPMENT (Identify each piece of equipment separately)	LINE ITEM AMOUNT (\$)
Item:	
Use in REP Activity:	\$ 0
Item:	
Use in REP Activity:	\$ 0
Item:	
Use in REP Activity:	\$ 0
Item:	
Use in REP Activity:	\$ 0
SUBTOTAL FOR PART II = \$ 0	

PART IV. SUPPLIES AND SERVICES:	
Phones	\$ 960.00
	\$ _____
	\$ _____
SUBTOTAL FOR PART IV = \$ 960.00	

PART V. PLANNING AND ADMINISTRATION:	
4 X 25 X 45.00	\$ 4,500.00
# of people # of hours \$ per hour	
SUBTOTAL FOR PART V = \$ 4,500.00	

TOTAL SFY ASSESSMENT REQUEST = \$ 13,960.00

Community: Rochoester	
LOCAL COMMUNITY	DATE
Reviewed by: <u>Norm Ambrose Jr.</u> Emergency Management Director	<u>3 / 15 / 16</u>
Approved by: <u>D. W. Fitzgerald</u> Authorized Signature	<u>MAR 16 / 2016</u>
NEW HAMPSHIRE HOMELAND SECURITY & EMERGENCY MANAGEMENT	DATE
Reviewed by: _____ Field Representative	/ /
Approved by: _____ Chief, Technological Hazards	/ /

***Special Note for Training:

To be reimbursed for training expenses, course record with names of municipality's participants must be submitted in addition to invoice from appropriate community.