DUC LICE ONLY	DO #-	38507	D	69970
DHS USE ONLY	P.O. #:		Receipt #:	

STATE OF TENNESSEE Department of Human Services INVOICE FOR REIMBURSEMENT

Division Name: FAMILY ASSISTANCE

INVOICE FOR REIMBURSEMENT

Program Type: Employment and Case Management Services (ECMS)

Contractor/Grantee Information

CONTRACT NUMBER: 56828

THE AMERICA WORKS OF TENNESSEE, INC.

CONTRACT PERIOD: FROM: 07/01/2019

 Agency Name:
 AMERICA WORKS OF TENNESSEE, INC.
 CONTRACT PERIOD:
 FROM:
 07/01/2019

 Address:
 228 EAST 45TH STREET, 16TH FLOOR
 TO:
 06/30/2020

 City, State Zip Code:
 NEW YORK, NY 10017
 INVOICE NUMBER:
 AWTN10/19

 Contact Person/Phone Number:
 212-599-5627
 10/01/2019

 VENDOR NUMBER:
 194497
 TO:
 10/31/2019

	А			В	С	D	E
COST CATEGORY OR PROGRAM			TOTAL CONTRACT BUDGET	ACTUAL YTD EXPENDITURES through 10/31/2019 (enter last day of invoice period: MM/DD/YYYY)	TOTAL MONTHLY EXPENDITURES for 10/2019 (enter invoice month & year: MM/YYYY)	REMAINING CONTRACT BUDGET BALANCE	
4, 15	4,15 PROFESSIONAL FEES/GRANT & AWARDS			\$13,705,564.30	\$551,800.00	\$146,800.00	\$13,153,764.30
	District #	Caseload #	Client Rate	\$11,923,840.94	\$513,000.00	\$122,000.00	\$11,410,840.94
	SHELBY County Caseload	610	\$ 200.00	\$11,923,840.94	\$513,000.00	\$122,000.00	\$11,410,840.94
Contractor Milestone Incentives			\$1,781,723.36	\$38,800.00	\$24,800.00	\$1,742,923.36	
SHELBY Contractor Milestone Incentive			\$1,781,723.36	\$38,800.00	\$24,800.00	\$1,742,923.36	
16 SPECIFIC ASSISTANCE TO INDIVIDUALS			\$2,797,555.42	\$161,085.15	\$56,200.54	\$2,636,470.27	
	SHELBY : Supportive Services				\$69,592.72	\$24,832.04	\$2,636,471.20
	SHELBY: Transportation Assistance		\$2,797,555.42	\$69,391.50	\$17,218.50		
	SHELBY: Incentive Issuances			\$22,100.00	\$14,150.00		
22	22 INDIRECT COST			\$2,310,438.53	\$99,803.92	\$28,420.08	\$2,210,634.61
	SHELBY Indirect Costs			\$2,310,438.53	\$99,803.92	\$28,420.08	\$2,210,634.61
	OTHER: AUDIT QUESTION COSTS			\$0.00	\$0.00	\$0.00	\$0.00
	TOTAL			\$18,813,558.25	\$812,689.07	\$231,420.62	\$18,000,869.18

I certify to the best of my knowledge and belief that the data above are correct and that all expenditures were made in accordance with the contract conditions and that payment is due and has not been previously requested.

TOTAL PAYMENT DUE

\$231,420.62

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CONTRACTOR'S AUTHORIZED SIGNATURE	DHS AUTHORIZED CERTIFICATION
SIGNATURE:	
Which Maddler	SIGNATURE:
NAME/TITLE: Mark Mackler / CFO	NAME/TITLE:
DATE: 12/16/2019	DATE:
DATE: 12/16/2019	DATE: