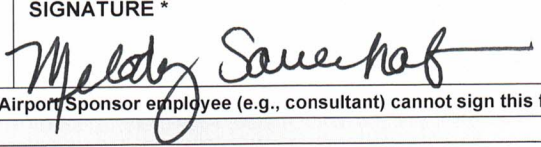




STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
AVIATION GRANT PROGRAM
PROJECT MONITORING STATUS REPORT

725-040-30
AVIATION
11/17

| | | |
|---|---|--|
| INSTRUCTIONS: Airport Sponsor (AGENCY) or designated representative to complete this form. Note: The Airport Sponsor may supplement this form with their own normal project progress report or FAA Progress Report documents | | |
| AIRPORT NAME City of Avon Park | DATES OF REPORT PERIOD From 05/01/2023 To 07/20/2023 | FDOT FINANCIAL PROJECT NO. 448711-1-94-01 |
| PROJECT DESCRIPTION Avon Park Executive Airport (AVO) - FBO/Terminal Apron Rehabilitation | | |
| INVOICE ATTACHED: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | FAA PROGRESS REPORT ATTACHED: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | OTHER PROGRESS REPORT ATTACHED: Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| PHOTOS ATTACHED: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | PROJECT NOTICE-TO-PROCEED DATE 12/5/2022 | ESTIMATED PROJECT COMPLETION DATE 6/30/2023 |
| TOTAL PROJECT COST \$267,374 | GRANT FUNDS EXPENDED TO DATE \$209,497.18 | GRANT FUNDS REMAINING \$32,095.72 |
| 1. PROJECT STATUS The project has achieved substantial completion of the contract work as of 6/30/2023. | | |
| 2. WORK COMPLETED OR IN PROGRESS THIS PERIOD (use a separate sheet of paper if more space is needed) For the reporting period, no work was completed by the Contractor as material cure time (seal coat) was required to elapse prior to application of final markings. | | |
| 3. WORK ANTICIPATED FOR NEXT PERIOD (use a separate sheet of paper if more space is needed) For the next progress period, the Contractor will complete all punch-list items, including application of final markings, as identified during the substantial completion walkthrough and submit close-out documentation in accordance with the Contract Documents. | | |
| 4. PROBLEM AREAS/OTHER COMMENTS (Plan revisions, changes in specifications, delays, difficulties, etc., and actions taken) NA | | |
| AIRPORT | AIRPORT SPONSOR (AGENCY) OR DESIGNATED REPRESENTATIVE I certify that the information provided above is true and correct per the terms of the Public Transportation Grant Agreement. | |
| | DATE 09/18//2023 | SIGNATURE *  |
| | PRINTED NAME AND TITLE * Melody Sauerhafer, Finance Director | |
| * Only the Airport Sponsor or Designated Representative may sign this form. A non-Airport Sponsor employee (e.g., consultant) cannot sign this form. | | |
| FDOT | COMMENTS/NOTES | |
| | VERIFICATION DATE | SITE VISIT Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| | DISTRICT AVIATION COORDINATOR PRINTED NAME | |
| DISTRICT AVIATION COORDINATOR SIGNATURE | | |



STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
AVIATION GRANT PROGRAM
PROJECT INVOICE FORM

725-040-29
AVIATION
09/18

INSTRUCTIONS: This form will be submitted in addition to the normal sponsor invoice submission documentation.

| | |
|---|--|
| Recipient Name: City of Avon Park | Address: 110 E. Main Street |
| | City, State, Zip: Avon Park, Florida 33825 |

Bill To:

Florida Department of Transportation
Dawn Gallon
P.O. Box 1249
Bartow, FL 33831-1249

| | |
|---|--|
| Invoice No.: 3 Invoice Period: 5/1/23 to 07/20/23 Contract No.: G2C70 Amendment No.: | FM Number: FM Number: Allowable Cost Incurred: FDOT Grant / Match Amount: |
| Project: 448711-1-94-01 | |

| Project Phases | Total FDOT Grant Amount by Project Phase | Total Previous Amount Paid for FDOT Grant | Current Invoice Amount Requested for FDOT Grant | Remaining FDOT Grant Balance |
|-----------------------------------|--|---|---|------------------------------|
| Land Acquisition | \$ | \$ | \$ | \$ 0.00 |
| Planning | \$ | \$ | \$ | \$ 0.00 |
| Environmental/Design/Construction | \$267,374.00 | \$214,708.47 | \$15,442.27 | \$37,223.26 |
| Capital Equipment | \$ | \$ | \$ | \$ 0.00 |
| Match to Direct Federal Funding | \$ | \$ | \$ | \$ 0.00 |
| | \$ | \$ | \$ | \$ 0.00 |
| | \$ | \$ | \$ | \$ 0.00 |
| Totals: | \$267,374.00 | \$214,708.47 | \$15,442.27 | \$37,223.26 |

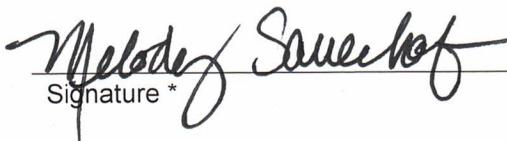
Note: The cost and amounts shown on this invoice form are reflective of the values shown in the Agreement, Exhibit "B", Schedule of Financial Assistance.

AIRPORT SPONSOR (AGENCY) OR DESIGNATED REPRESENTATIVE

I certify that the information provided above is true and correct per the terms of the Public Transportation Grant Agreement.

Melody Sauerhafer
Airport Sponsor Representative Printed Name *

Finance Director
Title


Signature *

09/18/2023
Date

* Only the Airport Sponsor or Designated Representative may sign this form. A non-Airport Sponsor employee (e.g., consultant) cannot sign this form.

For information regarding this invoice, please contact (Name, Phone No.): 863-452-4410

Distribution: Project File