## Cultural Facilities Fund Invoice Submission Form for Capital Grants

Instructions: Submit a separate Invoice Submission Form for each individual Budget Item. Attach invoice(s), and, if applicable, evidence of payment for "past due" amounts of 30 days or more. Invoices should provide sufficient detail to allow MassDevelopment to determine the nature, location, and date of the work for which the invoice was issued.

Name of Grantee/Cultural Facility Middlesex Canal Association, Inc.
Dollar Amount of Grant \$200,000
Budget Line Item Insulation
Dollar Amount in Project Budget (Exhibit B) for <b>this</b> Budget Item
Dollar Amount previously disbursed by MassDevelopment against this Budget Line Item  ()
Dollar Amount of invoices submitted for this disbursement from Grant against <b>this</b> Budget Line # 35, 700.
By signing below, I certify that I have reason to know of the accuracy of these invoices and the status of completion of the work. I certify that the charges being invoiced in the invoice(s) attached hereto are for actual work completed on the Project (insert Project name on this line)  Middlesex Canal Visitor Center/Museum, 2 Old Elm St for the period from October 1, 2021 to February 28, 2023, the charges are accurate and constitute "Agreed Costs," as such are defined in the Cultural Facilities Fund Capital Grant Agreement, the information provided on this Form is accurate, and this work was not the basis of any prior invoice submission.
Dated: February 17, 2023 Grantee/Cultural Facility: Middlesex Canal Association, Incorporated
Signature: Deremiah Breen Name: IJ Jeremiah Breen Its: President  Resident
Name: Russell B. Siva  Its: [Chief Financial Officer or Treasurer]

Please note that when reviewing invoices and disbursement requests against the Updated Budget line items, MassDevelopment reserves the right to consider and apply a variance of up to 15% per item. In no event shall total disbursements exceed the Grant Amount.

Project Completion Date: February 28, 2023



*INVOICE* 13954797

350 Worcester Street West Boylston MA 01583 (508) 835-5970 (508) 835-5973 Fax www.allinonemooreinsulation.com

**Customer Address** COGL01

Cogley Construction 250 Douglas Road Whitinsville, MA 01588 Invoice Date: 7/31/2022

## Job

Cogley Construction\*- 2 Old Elm Street Billerica, MA(Foam Packet Signed)

## Phase

Cogley Construction\*- 2 Old Elm Street Billerica, MA(Foam Packet Signed)(Foam)LL6322

Job Address 2 Old Elm Street BILLERICA, MA 01821

<b>Date:</b> 7/31/2022	<b>Job:</b> 5383900- 1I	PO #:	Sales Rep: Scott Delafontaine	
Work Area	Invent	ory Item	Option Price	
Roof Line	Demilec Heatlok HFO Summer 6.5" R-49.00 Closed- Cell Foam			
Walls	Demileo Foam	Demilec Heatlok HFO Summer 3" R-22.50 Closed-Cell Foam		
	Insulation	on Material and Labor Pu	rsuant to Contract	

**NOTES:** 

Base Price:	\$35,700.00
Option Price:	\$0.00
Invoice Total:	\$35,700.00
Retainage:	\$0.00
Job Deposit:	(\$28,180.00)
Payments/Adjustments Received	\$0.00
Balance Due:	\$7,520.00
Current Due:	\$7,520.00

Please Pay This Amount

Please include your invoice number on your remittance

TERMS: Upon acceptance of proposal a 33% deposit is required to schedule job; remaining 67% to be paid day of completion per phase.