



State of Utah

SPENCER J. COX  
*Governor*

DEIDRE M. HENDERSON  
*Lieutenant Governor*

**Department of Government Operations**  
**Division of Facilities Construction and**  
**Management**

MARVIN DODGE  
*Executive Director*

ANDY MARR  
*Interim Director*

## Funding Commitment Letter for DFCM Projects

DFCM Project Name:

DFCM Project Number:

Description of Work Covered by Funding:

Previous Committed Amounts: \$

This Commitment Amount: \$

Total To-Date Commitments: \$

Please select one:

- Transfer the entire funding amount to DFCM immediately. Any excess funds will be returned at the end of the project.
- Process a monthly reimbursement billing for project costs accumulated over each month. The total billing will not exceed the amount certified above. Invoices must be paid to DFCM within 14 days of the billing date.

Funding Requirements (if applicable):

- Check this box if funding is going to be invoiced to your organization by DFCM
- Check this box if funding is provided by a FINET Coding String, if so, see below.

FINET Coding String (for State Agencies only):

Fund -

Dept -

Unit -

Appr -

Rev/Object - 7520

Activity/Function (if applicable) -

I certify that I have the authority to commit funds for the above-mentioned project in the amount stated above.

Name:

Organization:

Authorized Signature: \_\_\_\_\_

Date: \_\_\_\_\_