FY2023-24 State Financial Assistance Drone Replacement Program Compliant Drone Reimbursement Request (Option 1)

Award #:	Request #:	Re	ecipient:					
60GG-2.0075, Florid	ecipients are required to da Administrative Code. I ompliant drone purchase	n order to receive reir	nbursement for			in compliance with Rule ecipient must complete the fo	ollowing	
Manufacturer	Model	# Purchased	Unit Price	Shipping/Tax	Date Paid	Payment Method	Total	
						Total:		
By signing below I co	ertify the drones above a	ıre compliant with all բ	provisions outlin	ne in Rule 60GG-2	2.0075, Florida	Administrative Code.		
I also certify the follo	owing documents are atta	ached to document the	e purchase of e	ach drone listed a	bove.			
	Purchase Order							
	Invoice							
	Proof of Payment (Cancelled Check, Bar	nk/Card Statem	ents, etc.)				
Chief Official Signa	Ti	Title						