TENNESSEE DEPARTMENT OF AGRICULTURE
AGRICULTURAL RESOURCES CONSERVATION FUND
WORKSHEET FOR PAYMENT OF TECHNICAL ASSISTANCE THROUGH A CONTRIBUTION AGREEMENT

GRANTEE: _____ **STATE FISCAL YEAR:** _____

NAME OF TECHNICIAN: _____
(print)

TIME PERIOD COVERED BY THIS PAYMENT REQUEST	
Begin Date:	**End Date:**
Jobs Performed:	
Total Hours Worked this Period:	
Hourly Rate:	**$**
Total Charges:	**$**
County Portion of Total:	**$**
TDA Portion of Total:	**$**
USDA - NRCS Portion of Total:	**$**

I certify this record is accurate to the best of my knowledge.

_____ _____
Technician's Signature Date

Reviewed and Submitted for Payment:

_____ _____
SCD Board Chair Date

_____ _____
TDA Watershed Coordinator Date

Certification Requirements for NRCS/TDA Contribution Agreement NR194741XXXXC001

Technician shall complete the following:

Technician is working to meet/achieve the deliverables as outlined via this agreement. ☐Yes ☐No
Technician is capturing and entering workload deliverables into Toolkit, PRS, etc. ☐Yes ☐No
Technician is working with their District supervisor to verify hours worked are accurate and properly certified. ☐Yes ☐No

Acres of Cropland Affected this Month _____
Acres of Grazing Land Affected this Month _____
Acres of Forest Land Affected this Month _____
Number of Brief TA Contacts this Month _____

_____ _____
Technician's Supervisor (DC) Date

Approved for Payment:

_____ _____
TDA Land and Water Stewardship Date