

**ORGANIZATION  
NAME:** \_\_\_\_\_



**NEIGHBORHOOD BUSINESS DISTRICT SUPPORT FUND  
MONTHLY FINANCIAL REPORT**

RETURN TO DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT, 805 CENTRAL AVENUE, II CENTENNIAL PLAZA, STE. 700, CINCINNATI, OHIO 45202 OR TO SCOTT WOLFE AT [DIANA.VAKHARIA@CINCINNATI-OH.GOV](mailto:DIANA.VAKHARIA@CINCINNATI-OH.GOV). REPORTS MUST BE SUBMITTED WITHIN 15 DAYS FOLLOWING THE END OF EACH CALENDAR MONTH, REPORTING THE EXPENSES MADE DURING THE MONTH THAT JUST ENDED.

<b>ORGANIZATION</b>	
---------------------	--

<b>NBDSF TOTAL AMOUNT APPROVED</b>	\$3,750.00	<b>CONTRACT NUMBER</b>	
------------------------------------	------------	------------------------	--

	<b>NAME</b>	<b>PHONE #</b>	<b>EMAIL</b>
<b>REPORT SUBMITTED BY</b>			

<b>MONTH</b>		<b>NBDSF YEAR</b>	<b>FY2024</b>
--------------	--	-------------------	---------------

**NBDSF – PROJECT EXPENSE SUMMARY**

Please submit the following summary financial report for expenses related to the Neighborhood Business District Support Fund contract. Projects listed here must match the Proposal approved by the CNBDU Review Committee and in the organization’s contract with the City.

<b>NBDSF APPROVED PROJECTS</b>	<b>TOTAL APPROVED BUDGET*</b>	<b>YEAR-TO-DATE EXPENSES</b>	<b>BALANCE</b>
<b>TOTALS</b>			

<b>TOTAL NBDSF BUDGET</b>	
<b>- TOTAL SPENT NBDSF FUNDS</b>	
<b>TOTAL UNSPENT NBDSF FUNDS</b>	

\*If you requested an informal amendment, please attach documentation verifying the amendment was approved

Please complete **Attachment A: Expense Report** for each project as applicable.