

REQUESTING REIMBURSEMENT FOR A COMPLETED PROJECT

It is advised that all purchases are paid at least one month before the end date of the grant, to ensure you can meet the reimbursement submission deadline stated on your signed contract and on the Purchase Order you received from DFE.

And REMEMBER: If you must request copies of cancelled checks from your bank, make that request in time request to allow for the bank to respond. This can take up to a month, depending on when the check was cashed.

- 1. Complete and submit the required paperwork, listed below, by the contract deadline
- 2. All forms must be signed, proof of payment for all invoices and any match documentation must be attached at final submission.

NOTE: Request for reimbursement can be made at any time during the contract period and before the contract deadline, once the project is completed and the match requirements have been met.

The Request for payment **must** include the following documentation:

- FORM Complete the <u>Request for Reimbursement Form</u> with the signature of the authorized person of the department. Please submit with an original signature.
 Include the **exact amount** of the project and the amount to be reimbursed.
 - The reimbursement amount can be no greater than the amount awarded and stated in the contract.
 - The reimbursement amount cannot be more than 50% of the match provided, even if that amount is less than the original amount awarded (see the grant application information for clarification).

- 2. INVOICES Include a copy of each invoice with reference to payment method, and check number if applicable. Attach legible proof of payment to each invoice.
- 3. PROOF OF PAYMENT Include a copy of each invoice with reference to payment method, and check number if applicable. Attach legible proof of payment to each invoice.
 - o Checks: copy of FRONT AND BACK of each check
 - Credit cards: copy of the **STATEMENT**; copy of **FRONT AND BACK** of each check used to pay the statement, or banking statement if not paid by a written check
- 4. MATCH DOCUMENTATION, if not cash.

If match is being provided using volunteer hours:

- o the rate for volunteers is \$24.34 per hour
- Attach sign-in sheets for personnel, including hours, or attach a signed letter from the Chief or project coordinator with the dates, names and hours of the personnel who participated in the work.
- 5. SUBMIT the reimbursement request to: Volunteer Fire Assistance Grant Program, 260 Arcadia Rd, Hope Valley, RI 02832

PRINT THIS INFORMATION

Request for Reimbursement Form