

METRO EAST PARK AND RECREATION DISTRICT
FY12 - FY17 GRANT REIMBURSEMENT REQUEST FORM
(PLEASE TYPE IN THIS FILLABLE PDF, SAVE TO YOUR COMPUTER, AND PRINT/SIGN)

Submit your request only after the project is complete and a permanent grant acknowledgment sign has been installed at the project site. Please allow 45 days after the Metro East Park and Recreation District receives this packet for verification of documentation, final approval of the reimbursement request, final site inspection, and actual grant reimbursement payment. The Metro East Park and Recreation District may request additional documentation, which could extend this timeframe.

Project Title: _____

Project Sponsor: _____

Project Sponsor Mailing Address: _____

Project Contact: _____

This request represents a: Standard Applicant Rural or Economically Distressed Applicant.

Enter the following totals for actual project costs. Only include eligible costs related to the project scope and project components approved by and on file with Metro East Park and Recreation District.

- A. Monetary contribution by the Project Sponsor \$ _____
- B. Value of force account labor by the Project Sponsor \$ _____
- C. Required Local Match total. Add A+B from above \$ _____ which is _____ % of line G
- D. "Non-public" grants, funds, and monetary donations \$ _____ which is _____ % of line G
- E. Federal, state, or local grants (excluding MEPRD) \$ _____ which is _____ % of line G
- F. Requested MEPRD Grant (must be ≤ original grant) \$ _____ which is _____ % of line G
- G. Total Project Cost. Add C+D+E+F from above \$ _____ which is 100% of eligible costs

Continue to page 2 for detailed checklist of supporting documentation to include in your request packet.

Certification Statement

I do hereby certify that the information presented in this reimbursement request is true and correct. The undersigned acknowledges and represents that he/she has the authority and permission to execute this Reimbursement Request and to bind the organization or entity thereby.

Signature: _____ Date: _____

Printed Name: _____

Printed Title: _____

FOR OFFICE USE ONLY		
Date Received: _____	Verified by: _____	Approved by: _____

Supporting Documentation Checklist

In addition to page 1, enclose this checklist along with the following information in your reimbursement request package. The combined totals for all sections below should equal Line G from page 1 (actual eligible Total Project Cost). Please tab sections within your reimbursement request per the major headings/sections below.

Only submit detail for sections that were a component specifically listed within MEPRD's approved grant application. For example, if A/E services were performed, but the cost of A/E services were not included in the approved grant application, no detail is needed. Check the "not applicable box" and move on.

I. Architectural / Engineering Services Not Applicable

- Copy of signed contract / agreement
- Copies of pay request(s) along with cancelled check(s)
- % allowed for within MEPRD's approved application: _____ % of eligible development costs.

Total for this section: \$ _____ which is _____ % of eligible development costs.

II. Construction Costs Not Applicable

- Itemized list of eligible items
 - Itemized list and documentation of force account labor, if applicable
 - A brief description of each contract, if applicable
 - Proof of bid advertisement(s) (relevant page only), if applicable
 - Copies of pay request(s)/invoice(s) along with cancelled check(s) for each
- Note: If this section contains a large number of invoices, also submit a spreadsheet printout which lists invoice numbers and amounts. The list order should match the documentation order.*

Total for this section: \$ _____

III. Acquisition or Other Costs Not Applicable

- Itemized list of eligible items
- Copies of cancelled check(s) or other payment documentation

Total for this section: \$ _____

IV. Documentation of Grants Not Applicable

- Proof of actual payment amount for each grant listed on lines D and E on page 1. For example, this could be copies of a letter accompanying final payment, bank statement(s) showing the relevant deposit(s), and/or other documentation of final grant payment.

V. Photos of the project site / area / development. High-resolution electronic photos are preferred (CDs/USB drives will not be returned).

- At least six (6) from various viewpoints
- At least one (1) of the grant acknowledgement sign (installation of sign is required prior to submitting reimbursement request)

Have Questions? We're here to help! Contact Cole Preston, Grant Coordinator, at 618-346-4905.

Submit Reimbursement Packet to:

Metro East Park and Recreation District
Attn: Cole Preston, Grant Coordinator
104 United Drive
Collinsville, Illinois 62234

Direct Questions to:

Cole Preston at (618) 346-4905 or cpreston@meprd.org

www.meprd.org