8(g) Project Reimbursement Request Instructions

1. The following forms: the **8(g) Project Reimbursement Request Form** and the **8(g) Request for Funds-Continuation Sheet** are used to request reimbursement of funds. These requests should be submitted to the BESE office on a monthly basis. All appropriate information on the request should be given that is applicable to the program. All reimbursements are based on actual expenditures, not obligations. The entity is responsible for maintaining detailed information to support this request. Copies of supporting documents (invoices, time sheets, payroll sheets, etc.) need not be submitted with the request unless specified by the program.

2. Each recipient may request only actual expenditures for which they have issued a check for payment.

3. The request number should start with one (1) for the first request and continue in numeric order. The recipient **MUST** assign a unique invoice number to each request for funds. This is used for tracking reimbursements in the statewide information system (ISIS). The unique invoice number, which is an invoice number from the recipient, must be an alphanumeric designation of one to twelve characters unique for each request. This unique invoice number must be included on both the **8(g) Project Reimbursement Request Form** and the **8(g) Request for Funds Continuation Sheet**.

4. The Request for Funds is a two-part form: the **8(g) Project Reimbursement Request Form** and the **8(g) Request for Funds-Continuation Sheet**. Preparation of the request would begin by completing the **8(g) Request for Funds-Continuation Sheet**, then transfer the total for each object code to the **8(g) Project Reimbursement Request Form**.

5. Enter the following information on the **8(g) Project Reimbursement Request Form** and the **8(g) Request for Funds-Continuation Sheet**.

A. Complete the **8(g) Project Reimbursement Request Form** as follows:

   1. Project Log Number – assigned by the 8(g) staff, project log number located on grant approval e-mail.
   2. Agency as it appears on grant approval e-mail.
   3. Title as it appears on grant approval e-mail.
   4. Agency Invoice Number - the agency invoice number is assigned by the entity and is on the check stub for verification upon deposit.
   5. Reimbursement Covering - Request Period - indicate the monthly period the expenditures were paid (e.g., October 1 - October 31, XXXX).
   6. Amount Requested column-enter the total expenditure amounts for each object code from the **8(g) Request for Funds-Continuation Sheet**. The agency must refer to the last approved budget for the object codes and expenditure category funding amounts.

7. Preparer's Name and Phone Number - name of person to be contacted for questions concerning this request.
8. Request for funds **must be signed by a representative of the agency head or authorized designee**. It is the entity's responsibility to ensure that they have instituted adequate internal controls for authorized signers. Requests submitted on behalf of the entity are assumed authorized. The entity will be responsible for any financial misrepresentations appearing on the request for funds regardless of the individual/position of the signer.

B. Complete the **8(g) Request for Funds- Continuation Sheet** as follows:

1. Heading information as completed on the **8(g) Project Reimbursement Request Form**.
2. Date Column - Enter the date of the invoice for each purchase, the pay period for salaries and employee benefits, or the date of the invoice for each purchased service.
3. An Invoice Number or Check Number must be provided. In the absence of the invoice or check number, the item will be deducted from the payment request.
4. Name of Vendor - Enter the name of the vendor for purchases, name of the vendor/contractor for purchased services, name of the employee or position for salaries, or the name of the person traveling, etc.
5. Object Code - Enter the object code for each expenditure.
   Group all entries for the same object code; show a total for that object code, and transfer that total to the 8(g) Project Reimbursement Request Form before entering expenditures for the next object code.
6. Amount - Enter the exact amount in dollars and cents.
7. Request for funds are to be e-mailed in PDF format to **BESE.8g@la.gov.** The subject line of the e-mail should be entitled "Reimbursement Request" with the log number and request number (i.e. Reimbursement Request - 001-131.1).

DO NOT MAIL OR FAX DUPLICATE REQUESTS

If you have any questions or concerns, please do not hesitate to contact the 8(g) office at (225) 342-5840.