

Financial Reimbursement of Expenditures Reporting Form

Prepare an itemized request for reimbursement expenditures in each budget categories for each deliverable. Attach copies of purchase orders and paid vouchers, invoices, copies of checks, journal transfers, required for expenditure justifications. If there is insufficient space, please include details in an attachment.

County Name:	Grant #	Req.#	Date:
--------------	---------	-------	-------

Budget Categories

Deliverables	Unit Price (\$)	Quantity	Total Amount (\$)	Previous Request Amount	Current Request Amount (\$)
A. System (Hardware, Software, Equipment, & Labor)					
B. Services (Training, Maintenance, and Warranty Items)					
Grant Request Total					

Request payment of progress payment funding (if applicable)	<hr/> Signature, County 911 Coordinator or Grant Manager
Justification of payment funding need:	