

**METRO EAST PARK AND RECREATION DISTRICT**  
**FY18 – FY21 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. Only include applicable and 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. "Non-public" grants, funds, and monetary donations \$ \_\_\_\_\_
- D. Required Local Match total. Add A+B+C from above \$ \_\_\_\_\_ 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 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.*

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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 C and E on page 1. For example, this could be copies of a letter accompanying final payment <sup>1</sup>, bank statement(s) showing the relevant deposit(s), and/or other documentation of final grant payment.
- <sup>1</sup> *Note that MEPRD may also accept a final letter from the granting agency if payment is still pending; however, the letter must identify the final, approximate grant amount due to the project sponsor (i.e. not subject to further change). MEPRD reserves the right to request additional evidentiary documentation from the project sponsor.*

- 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](mailto:cpreston@meprd.org)

[www.meprd.org](http://www.meprd.org)