## Get the Lead out of School Drinking Water Reimbursement

Request for Reimbursement Guide

Use this guidance to submit your reimbursement request for the Get the Lead Out of School Drinking Water expenditures.

Lead Out of School Drinking Water expenditures.
ED CONTRACT
You have received the executed contract from the Department of Health and Senior Services. This will have your contract number on it.
TNG SAMPLE RESULTS
Sample results must be uploaded BEFORE we process your
<u>reimbursement.</u>
All your drinking water outlets have been sampled and tested. You have the results from the approved laboratory. Determine what if any drinking water outlets exceed >5 ppb. Identify which outlets were remediated. Upload your sample results and complete the sampling summary in the <b>Reporting Portal.</b> Click here to be redirected to the portal.  Get the Lead out of Schools Landing Page.
ING THE VENDOR REQUEST FOR PAYMENT
<ul> <li>Fill out top portion of the Vendor Request for Payment DH-38 form (Attachment D) in your contract packet. Click here should you need another copy: Vendor Request for Payment (DH-38) Below defines each box and what information that should go in the box.</li> <li>Vendor Name: The school district is the Vendor.</li> <li>Invoice Number: The Invoice Number begins with PB followed by your district code assigned to you by DESE. Ex: PB012345-01.</li> <li>Vendor Remit to Address: The district address.</li> <li>State Vendor Number: Your FEIN number, Ex: 43-123456</li> <li>Billing Period: You can leave that blank.</li> <li>Contract Name: Get the Lead out of School Drinking Water.</li> <li>Contract Number: The number that appears on your executed</li> </ul>
<ul> <li>contract EX: DH240012345</li> <li>Amount Requested: The total amount you are requesting for this invoice. Note: Amount should not exceed the amount of your award.</li> <li>Comments Section: Total for all Sampling Costs, all Remediation Costs, Filtrations Costs, and Indirect Costs you are requesting reimbursement for this invoice.</li> </ul>

## 4. CONTRACTOR INVOICES AND RECEIPTS

<ul> <li>Collect all paid invoices and expense receipts for the Get Lead Out of School Drinking Water project.</li> </ul>
Total all your expenses for sampling/testing and transfer that amount to the Vendor Request for Payment form in the box next to Sampling Costs.
Follow the same procedure as above for Remediation Costs, Filtration Costs, and Indirect Costs.
ROOF OF PAYMENT
Proof of payment is required for all paid expenses. Please attach a copy of both the front and back of canceled checks, (if expense was paid with a check), credit card statements (if paid with a credit card), or a credit card payment receipt. You may also provide bank documents demonstrating the costs were debited from your account.
UBRECIPENT ANNUAL FINANCIAL REPORT
☐ The Subrecipient Annual Financial Report ( <b>Attachment C</b> ) in your contract packet must be returned with your final Vendor Request for Payment form. A copy of the annual financial report can also be retrieved by clicking this link: <u>Subrecipient Annual Financial Report</u>
RUTH STATEMENT
☐ Sign and date the Truth Statement. This was unintentionally left out of the original contact packet. Follow this link to retrieve a copy of the form. <a href="https://example.com/Truth.org/">Truth Statement Form</a>
NISHING UP
☐ Gather all your reimbursement documents.
Sign your Vendor Request for Payment form.
<ul> <li>Attach all your invoices and receipts.</li> <li>Attach all proof of payment documents that coincide with your expenses.</li> </ul>
<ul> <li>Complete and sign the Subrecipient Annual Financial Report.</li> </ul>
<ul> <li>Sign and date the Truth Statement.</li> <li>Email all these documents to <u>leadout.reimbursement@health.mo.gov</u></li> </ul>

Please allow for a 30-day turnaround before you receive your reimbursement. Should you have any questions please contact one of our team members at **573-751-6102**.