



RECREATIONAL AND SNOWMOBILE GRANTS PROGRAM OPERATING REIMBURSEMENT REQUEST

This information is required by authority of Part 821 Snowmobiles, 1994 PA 451, as amended to receive reimbursement.

TRAIL SPONSOR INFORMATION			
Trail Sponsor (Organization Name)	Sponsor Number	Grant Year	
<p>MONTH _____ GROOMING OPERATIONS</p> <p><u>DATE STARTED GROOMING</u> <u>DATE ENDED GROOMING</u> <u>TOTAL MILES GROOMED</u></p> <p>_____ to _____</p> <p><input type="checkbox"/> December <input type="checkbox"/> January <input type="checkbox"/> February <input type="checkbox"/> Final</p> <p style="text-align: right;">GROOMING OPERATIONS SUBTOTAL</p>			
			<p style="text-align: center;">DNR USE ONLY \$ AMOUNT</p> <p>\$ _____</p> <p>\$ _____</p>
BRUSHING AND SIGNING			
<u>PAYMENT METHOD</u>			<u>AMOUNT</u>
Fixed Monthly: <input type="checkbox"/> December <input type="checkbox"/> January <input type="checkbox"/> February <input type="checkbox"/> March			\$ _____
<input type="checkbox"/> 3-Months' Start-up Funds			\$ _____
<input type="checkbox"/> 1-Month Final Payment			\$ _____
BRUSHING AND SIGNING SUBTOTAL			\$ _____
UTILITIES PAYMENT REQUESTED			
Utilities payment is paid one time during the grooming season. Check your grant for the amount of your full annual Groomer Utility Payment			
			<u>AMOUNT</u>
UTILITIES PAYMENT TOTAL			\$ _____
TOTAL REIMBURSEMENT REQUEST			\$ _____

TRAIL SPONSOR SIGNATURES			
_____ Trail Sponsor Signature	_____ Date	_____ Trail Sponsor Signature	_____ Date

TRAIL SPONSOR: Return this completed Reimbursement Request to your Parks and Recreation Unit Contact.

* FOR DNR USE ONLY * - DEPARTMENT OF NATURAL RESOURCES AUTHORIZATION		
REMARKS: _____		

Approved By	Date	Amount Approved \$ _____

PRD - UNIT: UPON APPROVAL FORWARD THIS REQUEST TO PROGRAM SERVICES, LANSING.