



## REQUEST FOR REIMBURSEMENT OF MITIGATION PROJECT EXPENSES

**AUTHORITY: 1976 PA 390; COMPLIANCE: VOLUNTARY**

I. GENERAL INFORMATION			
Subrecipient Name:	Project Number:	Project End Date:	
II. GRANT AMOUNTS			
<b>1) Total of Approved Grant</b>			
Federal Share	Local Match	TOTAL Project Amount	
<b>2) Amount Spent to Date</b> - Enter the Total Dollar Amount Spent to Date.			<b>NOTE:</b> Amount entered must equal the total in <i>Project Amount Spent Since Last Request</i> and the most recently reported <i>Amount Spent to Date</i> .
<b>3) Total Received to Date</b> - Enter the Amount of the Federal Share of the Grant Received <b><u>Prior</u></b> to this Request.			
<b>4) Itemized Project Amounts Spent Since Last Request **</b>			
Contract Work	Materials / Supplies / Equipment Purchase	Equipment Usage	
Labor	Travel	<b>TOTAL</b>	
<b>5) Third Party / In-Kind Contributions</b> - Enter Any Third Party or In-Kind Contributions from the Itemized Project Amounts Above.			
<b>6) Federal Share Project Reimbursement Requested **</b>			Local Match Amount for this Reimbursement:
<b>7) Advanced Funds Requested ***</b>			
III. AUTHORIZATION			
Signature of Subrecipient's Authorized Representative			Date:
<b>Michigan State Police – Emergency Management &amp; Homeland Security Division (MSP/EMHSD) USE ONLY BELOW</b>			
Reimbursement Approved:	Federal Share Project Amount:	Signature of State Mitigation Representative:	Date:

**\*\* NOTE:** Attach Supporting Documentation to prevent delays in processing your reimbursement. \*\*

**\*\*\* NOTE:** Prior Approval is Required to Submit an *Advanced Funds* Request. \*\*\*