

Homeland Security Grant
Program
Reimbursement Process for
SHSP & NSGP

Overview of Process

- Subrecipient
 - Has work completed
 - Completes the reimbursement form
 - KHP fiscal **requires** an itemized invoice
- Send supporting documentation to Edna Cordner, Melanie Lawrence, Nathan Miller, and KHP.Homeland@KS.GOV
- Supporting documentation- also known as Source Documentation includes;
 - Bids or quotes
 - Bid or quote tabulation sheet- this sheet lists out all bids or quotes obtained
 - Pre-Approval forms such as for Planning/Training/Exercise also email approvals
 - Correspondence
 - Sealed bid information
 - Cancelled checks
 - Any other documents that support your itemized invoice

Reimbursement Form

- The only sections that need to be filled out by the recipient in the header section are the items in light green: Reimbursement # and Project

KANSAS HOMELAND SECURITY GRANT PROGRAM REIMBURSEMENT REQUEST / REQUEST FOR FUNDS			
Subrecipient Name:	KHP	Reimbursement Request Number:	
SMART Vendor Name:	KHP	Project:	
SMART Vendor Number:	28000	Account:	Grant: Fund-BU:

Reimbursement Form- Continued

- Project Financial Summary-this portion of the form reflects the expenses for the project the reimbursement is going against
- You will need to fill out category summary in this example I listed two invoices
- Expenditures this month is total amount being request for reimbursement
- Expenditures previous month; this is the total amount of previous reimbursements
- Total expenditures to date should match back to your tracker of total monies expensed

PROJECT FINANCIAL SUMMARY

Category	Expenditures This Month	Expenditures Previous Months	Total Expenditures To Date
Planning Exp or Salary		\$ 50.00	
Invoice XZXV	\$ 1,000.00		
Invoice ZXXX	\$ 25.00		
	\$ 1,025.00	\$ 50.00	\$ 1,075.00
Equipment			
	\$ -	\$ -	\$ -
Training			
	\$ -	\$ -	\$ -
Exercises			
	\$ -	\$ -	\$ -
Management & Administration (M&A)			
	\$ -	\$ -	\$ -
Indirect Costs:			
	\$ -	\$ -	\$ -
TOTALS:	\$ 1,025.00	\$ 50.00	\$ 1,075.00
APPROVED FOR PAYMENT:			
KHP HSO: _____		DATE: _____	

Reimbursement Packet

Program manager may require more documentation than the fiscal department.

The fiscal department requires the reimbursement form and itemized invoice.

Please do not send personal identification information to the fiscal department (no social security numbers, birth dates, etc.)