**MASSTRAILS PROGRAM**

**REQUEST FOR REIMBURSMENT**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ REQUEST NUMBER: 1 2 3 4**

**GRANT RECIPIENT (Circle one)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PROJECT NAME E-MAIL**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RECIPIENT SIGNATURE PHONE**

**Grant Award Amount: $\_\_\_\_\_\_\_\_ Previous Reimbursement Requests (Total):$\_\_\_\_\_\_\_\_\_\_\_**
(Do not include current reimbursement amount in the Previous Reimbursement Request Total above)

**Is this the FINAL Reimbursement Request? (**If yes, a FINAL REPORT must be attached to this request or reimbursement will be withheld. Final Report Forms can be accessed at the MassTrails Website or by contacting the MassTrails Grants Coordinator)

**Grant Accomplishments:** (Briefly, list grant accomplishments related to this reimbursement request. If partial accomplishment, indicate percent complete). Attach separate sheet if necessary.

**Dates of Service:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(This includes the dates of any work, expenditures and all match claimed on this reimbursement request – be sure the dates match!)

**Grant Funds Reimbursement:** List expenditures for which you are now requesting reimbursement. You must attach copies of dated records of actual expenses (receipts/invoices, payroll records, etc. – **no estimates/quotes**), and proofs of payment of expenses (cancelled checks, copies of credit card statements, town warrant items, etc.).

\*If a third party has paid for an item for which you want to be reimbursed, you must provide the invoice/receipt, proof of payment to the vendor by the third party, and proof of payment to the third party by the grantee/fiscal agent.

**LIST EXPENDITURES BY VENDOR/CONTRACTOR AMOUNT PAID RECIEPT? PROOF PAYMENT?**

**SEE NEXT PAGE FOR MATCHMatch:** **A 20% match must be submitted with each reimbursement request.** Itemize matching expenses and in-kind contributions. Attach copies of dated records of match (receipts/invoices with proof of payment, or staff/employee time sheets and proof of payment, or volunteer sign-in sheets, or in-kind services spreadsheets, or letter stating donation and value of the donation, etc.). Volunteer labor should be valued at a documented national or state-wide rate (see <https://independentsector.org/resource/vovt_details/>). As a note, the Massachusetts rate is typically higher than the national average. In-kind equipment as match must use FEMA rates or similar documented rating systems.

\*If you want to use the same match for multiple reimbursements (a large purchase, a big volunteer work day, etc.), you must submit the original documentation with each request. For example, you have a large work day with $5,000 worth of volunteer time and want to use $1k for this request, $1k for the next, and so forth. You must submit all of the volunteer documentation with each reimbursement request and keep a running tally of what you are using now and what is remaining for the next request.

**MATCH ITEM MATCH VALUE DOCUMENTATION?**

**TOTALS**

1. **TOTAL REIMBURSEMENT (80%):**
2. **TOTAL MATCH (20%):**
3. **TOTAL PROJECT VALUE (REIMBURSEMENT + MATCH):**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HOW TO CALCULATE MATCH**
Calculate the minimum match required by multiplying the Total Reimbursement Amount (#1 above) by .25 Example:

Total Reimbursement X .25 = Minimum Match
$10,000.00 X .25 = $2,500.00

The Total Project Value is then #1 + #2 = $12,500.00 (of which $10,000.00 is 80% and $2,500.00 is 20%)