**EXAMPLE: PAGE ONE, RECEIPTS REIMBURSEMENT WORKSHEET, *BLANK FORMS AVAILABLE PAGES 2-4***

* **LIST PROJECT NUMBER, TITLE, and corresponding EXPENSE DETAILS with each submitted receipt and paid invoice.**
* **If the purchases on one receipt or invoice were dedicated to one project, you do not have to list all items on the invoice.**
* ***If the purchases on one receipt or invoice include items for multiple projects, you need to itemize the expenses with some descriptors, SEE BELOW.***
* **Email** **rachelle.brown@mt.gov****, doctribal@mt.gov, or call 406-841-2734 with any questions**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Tribe NameJULY 2022 | Expense 1 | Expense 2 | Expense 3 | Expense 4 | ROW TOTALS |
| EX. Project \_\_\_1\_\_Restroom install | $745 Home Depot 7/5/221 receipt for 3 projectsBath fixtures, hardware | $987 ADA Co. 7/20/22 invoice #002Asafety bars & stall doors  | $350 Land Co.7/10/22 invoice #1234Site prep | $1780 Hertz 7/28/22 invoice #09876 backhoe rental | $3862.00 |
| EX. Project \_\_\_2\_\_Arena lighting | $14.75 Home Depot 7/5/221 receipt for 3 projectsLight switches, elect tape, nut covers | $543.06 Electrical Co. 7/18/22 invoice #989-22wiring of breaker box | - | - | $557.81 |
| EX. Project \_\_\_3\_\_Pavilion restore | $2000 Home Depot 7/5/221 receipt for 3 projectsPavilion- replacement wood rot | $4500 Roof Co. 7/10/22 invoice AQ-567Pavilion- Roofing shingles |  |  | $6500.00 |
| Ex. Project \_\_\_4\_\_ | $1450 Graphic Design Co. 7/23/22 invoice #4599 New sign for campground | - | - | - | - |
|  |  |  |  |  |  |
| Ex. GRAND TOTAL | 1 Home Depot receipt$2759.75 7/5/22(P1 $745 + P2 $14.75 + P3 $2000)6 invoices attached**Total of 7 proof of payment docs enclosed** |  |  |  | **$12,369.81** **July request for reimbursement** |

*BLANK FORMS TO BE FILLED IN….*

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| --- | --- | --- | --- | --- | --- |
| Tribe NameMonth/Year | Expense 1 | Expense 2 | Expense 3 | Expense 4 | TOTALS |
| Project numberProject name |  |   |  |  | Grant total row |
| Project numberProject name |  |  | - | - | Grand total row |
| Project numberProject name |  |  |  |  | Grant total row |
| Project numberProject name | - | - | - | - | Grand total row |
| Project numberProject name |  |  |  |  | Grant total row |
| GRAND TOTALS | number of receiptsnumber of invoicestotal number of attachments |  |  |  | Grant total of column amount for reimbursement |

*BLANK FORMS TO BE FILLED IN…..*

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| --- | --- | --- | --- | --- | --- |
| Tribe NameMonth/Year | Expense 1 | Expense 2 | Expense 3 | Expense 4 | TOTALS |
| Project numberProject name |  |   |  |  | Grant total row |
| Project numberProject name |  |  | - | - | Grand total row |
| Project numberProject name |  |  |  |  | Grant total row |
| Project numberProject name | - | - | - | - | Grand total row |
| Project numberProject name |  |  |  |  | Grant total row |
| GRAND TOTALS | number of receiptsnumber of invoicestotal number of attachments |  |  |  | Grant total of column amount for reimbursement |

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| --- | --- | --- | --- | --- | --- |
| Tribe NameMonth/Year | Expense 1 | Expense 2 | Expense 3 | Expense 4 | TOTALS |
| Project numberProject name |  |   |  |  | Grant total row |
| Project numberProject name |  |  | - | - | Grand total row |
| Project numberProject name |  |  |  |  | Grant total row |
| Project numberProject name | - | - | - | - | Grand total row |
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| GRAND TOTALS | number of receiptsnumber of invoicestotal number of attachments |  |  |  | Grant total of column amount for reimbursement |