

**METRO EAST PARK AND RECREATION DISTRICT**  
**FY 2025-26 PARK AND TRAIL GRANT REIMBURSEMENT REQUEST FORM**  
(PLEASE TYPE IN THIS FILLABLE PDF, SAVE TO YOUR COMPUTER, AND PRINT/SIGN)

**Submit your request only after the project is complete and a permanent grant acknowledgment sign has been installed at the project site.** Please allow 45 days after the Metro East Park and Recreation District receives this packet for verification of documentation, final approval of the reimbursement request, final site inspection, and actual grant reimbursement payment. The Metro East Park and Recreation District may request additional documentation, which could extend this timeframe.

Project Title: \_\_\_\_\_

Project Sponsor: \_\_\_\_\_

Project Sponsor Mailing Address: \_\_\_\_\_

Project Contact: \_\_\_\_\_

This request represents a:  Standard Applicant  Rural or Economically Distressed Applicant.

Enter the following totals. Only include applicable and eligible costs related to the project scope and project components approved by and on file with Metro East Park and Recreation District.

- A. Monetary Contribution by the Project Sponsor           \$ \_\_\_\_\_
- B. Value of Force Account Labor by the Project Sponsor   \$ \_\_\_\_\_
- C. "Non-Public" Grants, Funds, and Monetary Donations   \$ \_\_\_\_\_
- D. Federal or State Grants   \$ \_\_\_\_\_
- E. **Required Cost Share Total** (add Lines A through D)   \$ \_\_\_\_\_ which is \_\_\_\_\_ % of line H
- F. Local Public Grants and Funds (e.g., PEP Grant)         \$ \_\_\_\_\_ which is \_\_\_\_\_ % of line H
- G. Requested MEPRD Grant (must be ≤ original grant)     \$ \_\_\_\_\_ which is \_\_\_\_\_ % of line H
- H. **Total Project Cost** (add Lines E through G)           \$ \_\_\_\_\_ which is 100% of eligible costs

*Continue to page 2 for detailed checklist of supporting documentation to include in your request packet.*

Certification Statement

I do hereby certify that the information presented in this reimbursement request is true and correct. The undersigned acknowledges and represents that he/she has the authority and permission to execute this Reimbursement Request and to bind the organization or entity thereby.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Printed Title: \_\_\_\_\_

FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_ Verified by: \_\_\_\_\_ Approved by: \_\_\_\_\_

## Supporting Documentation Checklist

In addition to page 1, enclose this checklist along with the following information in your reimbursement request package. The combined totals for all sections below should equal Line H (Total Project Cost) from page 1. Please tab sections within your reimbursement request per the major headings/sections below.

Only submit detail for sections that were a component specifically listed within MEPRD's approved grant application. For example, if A/E services were performed, but the cost of A/E services were not included in the approved grant application, no detail is needed. Check the "not applicable box" and move on.

### **I. Itemized List of Eligible Project Expenses**

Download, fill-out, and sign the MEPRD [Project Expense Worksheet](#), i.e., an itemized listing of all eligible project costs and payment records. You may use your own itemized list in place of the MEPRD form; however, the Certification Statement from page 1 of the Project Expense Worksheet must be printed, signed and attached to the reimbursement packet.

### **II. Architectural / Engineering Services**

Not Applicable

Copy of signed contract / agreement

Copies of pay request(s) along with cancelled check(s)

% allowed for within MEPRD's approved application: \_\_\_\_\_ % of eligible development costs.

Total for this section: \$ \_\_\_\_\_ which is \_\_\_\_\_ % of eligible development costs.

### **III. Construction Costs**

Not Applicable

Itemized list of eligible items

Itemized list and documentation of force account labor (if applicable)

A brief description of each contract (if applicable)

Proof of bid advertisement(s) - relevant page only (if applicable)

Copies of pay request(s)/invoice(s) along with cancelled check(s) for each

Total for this section: \$ \_\_\_\_\_

### **IV. Acquisition or Other Costs**

Not Applicable

Itemized list of eligible items

Copies of cancelled check(s) or other payment documentation

Total for this section: \$ \_\_\_\_\_

### **V. Documentation of Grants**

Not Applicable

Proof of actual payment amount for each grant listed on lines C, D, and F on page 1. For example, this could be copies of a letter accompanying final payment, bank statement(s) showing the relevant deposit(s), and/or other documentation of final grant payment.

Written correspondence from the granting agency may satisfy this requirement, even if payment is still pending, if it states the final and actual grant amount due to the Project Sponsor. \*MEPRD reserves the right to request additional documentation from the project sponsor, if/as needed.

### **VI. Photos of the Project Site / Area / Development.** High-resolution electronic photos are preferred. (CDs/USB drives will not be returned).

At least six (6) from various viewpoints

At least one (1) of the Grant Acknowledgment Sign (must be installed prior to submitting for grant reimbursement with supporting documentation attached, i.e., invoice(s) and proof of payment)

**Have Questions? We are here to help!**

Contact Cole Preston, Grant Coordinator, at (618) 346-4905 or [by email](#).