

ILLINOIS LAW ENFORCEMENT TRAINING AND STANDARDS BOARD
Claim for Reimbursement - Police Traffic Services Training Project - IDOT Grant

1. Grant Applicant: _____ Date: _____

Prepared By: _____ Telephone: _____

Course Name: _____

Original Course Date: _____ Actual Date Course Held: _____

2. Project Costs by Grant Agreement Budget Category:

Contractual Services: \$ _____

Travel: \$ _____

Printing: \$ _____

Commodities: \$ _____

Equipment: \$ _____

Other: \$ _____

Total Cost Claimed: \$ _____

3. Certification: I certify the above and enclosed facts and figures are true and correct:
(Ink Signatures - Do Not Rubber Stamp)

Project Director

Date

I hereby certify that I am a duly-qualified and authorized official of the above named claimant and am responsible for the examination and settlement of accounts; that the above amounts claimed from the State of Illinois are proper charges for the Police Traffic Services Training Project and payment has not been received. I also certify that the fiscal records for this grant will be kept for five years after the final claim has been reimbursed.

Authorizing Official - Indicate Title

Date

Important Notice: The Board is requesting specific information that is necessary to accomplish the statutory purposes as outlined in the Illinois Police Training Act and/or Public Act 79-642. Failure to provide this information may prevent this form from being processed.

For ILETSB Use Only

Approved/Disapproved	Fund	Number of Students	Date

			Staff Initials _____