

# Instructions Regarding Requesting a Reimbursement

(Reimbursement Form)

Your monthly Reimbursement Request Form is located in the next tab, found along the bottom of your screen to the right of these instructions. This document is saved as a template - open the template each time you begin a reimbursement request for a given month.

Completing

This form was created using Microsoft Excel 2007, and will function best using that version of the program.

The spreadsheet for Attachment B is protected; the contractor will only be able to enter information into cells that are shaded pink. All other shaded cells will autopopulate as figures are calculated.

**Use a separate form for each month** in which services are rendered; do not include services from more than one month in each form. It is OK to submit multiple forms at a time if necessary.

The template contains 30 places for line-item entry. If more are needed, call Breann Stewart at 832-681-2515 to receive a form with more lines.

## Reimbursement Form

After completing the required information, save to your hard drive using a file name that includes the name of your county and the month for which reimbursement is being requested.

## Supporting Documentation

Submitting

Send supporting documentation (i.e. invoice) for each month as an attachment in the same e-mail with the Reimbursement Form. This is usually submitted in a pdf file and includes the following information *that can be seen and interpreted clearly*:

- Name of Agency
- Name of Service Provider
- Date of Service for Each Counseling Session and/or Evaluation
- Number of Units (be it counseling hrs or evaluations)
- Cost per Unit
- Total Cost

If the same invoice has items to be charged to H-GAC and another entity, make it clear exactly which charges are designated for H-GAC-contracted dollars.

Please redact all personal client information from invoices and billing documents that you send to H-GAC. Keep in mind that *marking over a name with a felt-tip or magic marker may not do the trick*.

Send the saved Reimbursement Form and supporting documentation to [breann.stewart@h-gac.com](mailto:breann.stewart@h-gac.com) with your county's name and the month for which reimbursement is being requested in the subject line.

Call Breann Stewart at 832-681-2515 if there are any questions.