

MONROE COUNTY TOURIST DEVELOPMENT COUNCIL

# REIMBURSEMENT PACKET

**CAPITAL PROJECT FUNDING**

**Name of Organization**

**Name of Project**

**Amount Funded**

2018

**REIMBURSEMENT REQUEST COVER SHEET**

**Mail or deliver completed reimbursement requests to the following address:**

Monroe County Tourist Development Council  
 1201 White Street (Suite 102)  
 Key West, FL 33040

**Name of Organization:**

**Name of Project:**

**\$ Contract ID:**

**Project Expiration Date:**

**Line Item Number:**

Check # or Name of Credit Card Used	Check or Credit Card Date	Payee	Reason	Amount Paid
A) Total of Above Submissions:				
B) Total of Prior Payments:				
C) Total Requested and Paid (A+B):				
D) Total Contract Amount:				
E) Balance of Contract (D-C):				

Extra expenditure listing sheets are available for your use at the back of this packet – please insert behind page 1 if needed.

**ATTACHMENTS AND CHECK LIST**  
**(Complete and Submit with Reimbursement Request)**

- I am the President of the Organization or the Project Manager listed within the signed Agreement (If this has changed please contact the TDC office immediately (305-296-1552 and ask for Ammie Machan or Maxine Pacini).
- I have reviewed Exhibit A of the Agreement and there are no changes (Contact the TDC office immediately if there are differences between Exhibit A and the work you have completed (305-296-1552 and ask for Ammie Machan or Maxine Pacini).
- I am submitting for Segment # \_\_\_\_ of \_\_\_\_ (Refer to Exhibit A).
- I understand that I will only be reimbursed for costs directly related to items listed in Exhibit A. The TDC does not pay for telephone charges; mailing or postage costs; travel expenses such as airline tickets, gas, rental cars, etc. I will contact the TDC office ahead of reimbursement if I have any questions regarding my submission.
- I have paid 100% of the segment or project cost up front to the entity completing work and have enclosed invoices and proof of payment to that entity in the form of a copy of the check with bank statement showing check has cleared; or credit card statement showing payment made – credit card used must be in the name of the organization who the agreement is entered into.
- My project amount exceeded \$50,000 and I am including backup to show that I followed the bidding/procurement guidelines of Monroe County or a notarized statement as to why this was unobtainable. (TDC Capital Project Competitive Solicitation Guidelines can be viewed at [www.monroecounty-fl.gov/tdc](http://www.monroecounty-fl.gov/tdc) ).
- My project cost was under \$50,000 and I am submitting 3 quotes which I received for the work completed or a notarized statement as to why this was unobtainable.
- I have attached copies of all contracts with contractors and sub-contractors.
- I have enclosed before and after pictures of the completed project.
- I will permanently display and maintain at my organizations own expense, public acknowledgement of the support of the Monroe County Tourist Development Council in a publicly prominent area of the facility in the following form: “This project was made possible with the financial support of the Monroe County Tourist Development Council.” A photograph of said acknowledgment is attached.
- I have completed the Reimbursement Request Cover Sheet and have securely attached all of the above mentioned documents.
- I have contacted the Monroe County Engineering Department at the number listed in my Agreement and they have inspected my project and signed off approval. I have attached the signed approval as part of my reimbursement packet.
- I have attached a notarized verification statement to this request for reimbursement.

REVIEW AND APPROVAL BY MONROE COUNTY ENGINEERING DEPARTMENT

**(Must be completed before submitting for reimbursement)**

I certify that as a representative of the Monroe County Engineering Department, I have reviewed and inspected the segment(s) of the project outlined under this request for reimbursement and it is my determination that the scope of services outlined in Exhibit A have been met.

\_\_\_\_\_  
Authorized Signature Representing Monroe County Engineering Department

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

\_\_\_\_\_  
Date of Inspection

VERIFICATION

**(To be completed by the President of the Organization or Project Manager; notarized and returned with submission for reimbursement)**

I swear and certify that the information contained within this submission for reimbursement is true and correct, and that I am the duly authorized representative of this capital project submission.

\_\_\_\_\_  
President or Project Managers Name (Printed)

\_\_\_\_\_  
Signature of President or Project Manager

Sworn to and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_ by \_\_\_\_\_ who is personal known to me \_\_\_\_ or produced a form of Identification\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

Notary Stamp:

