

**Member Community Infrastructure Program  
REIMBURSEMENT REQUEST – EXPENSE WORKSHEET**

**Member Community:** \_\_\_\_\_

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

**P.O. #:** \_\_\_\_\_ **Request Date:** \_\_\_\_\_

**Instructions:**

Record all expenses and attach relevant procurement documentation, such as an itemized bill, receipt, invoice, time card along with proof of payment, such as a credit card receipt, cancelled check, and/or other documentation to substantiate purchase and compensation as deemed acceptable by the NEORS D.

*Direct all Member Community Infrastructure Program reimbursement questions and reports to the Watershed Programs Department's, Watershed Funding Administrator, Linda Mayer, 440-253-2147, [mayerl@neorsd.org](mailto:mayerl@neorsd.org).*

<b>PROJECT DELIVERABLE</b>	<b>Cost per Unit</b>	<b>Total Units</b>	<b>Total Cost</b>	<b>Details</b>