

**INSTRUCTIONS
REQUEST FOR REIMBURSEMENT LC-07 (09-19)
FOR
APPALACHIA HIDTA PROGRAM**

WHERE TO SEND REQUEST

All agency requests for reimbursements are to be sent to your task force commander. (If you do not know your task force commander's contact information reach out to your state's coordinator listed below.)

Task Force Commander should forward agency requests to their state coordinator as listed below:

Daren Atkins
KY State Coordinator
Appalachia HIDTA
400 S. Main St., 3rd Fl.
London, KY 40741

Monty Houk
TN State Coordinator
Appalachia HIDTA
9724 Kingston Pike
Knoxville, TN 37922

Chad Napier
WV State Coordinator
Appalachia HIDTA
301G Midway Road
Alum Creek, WV 25003

Jason Miles
VA State Coordinator
Appalachia HIDTA
1104 Maple Hill Road
Jonesville, VA 24263

PAYMENT PROCESSING SCHEDULE

Requests for reimbursements should be submitted for processing on a monthly basis and no more than on a quarterly basis. The requests should be submitted no later than 30 days past the end of the month or quarter. **Final reimbursements for each calendar year are due 60 days after the end of the year.**

HOW TO REQUEST FOR A REIMBURSEMENT:

To request a reimbursement, the recipient must submit a **REQUEST FOR REIMBURSEMENT (FORM LC-07)** that indicates how the expenditures have been allocated. Appropriate copies of supporting documentation (i.e. cancelled invoices and payroll registers) must be attached to this form. Note: All supporting documentation must be separated into groups according to account code. A cover sheet should be attached to the group of invoices indicating which account code the invoices represent and an adding machine tape should be attached that reflects a total that matches the requested amount on the Form LC-07. Reimbursement requests should be made only for items that are in your agency's approved budget.

REQUEST FOR EQUIPMENT PURCHASES:

If your Form LC-07 includes request for reimbursement for equipment purchases, we will require that you attach a copy of the AH-01 form (Appalachia HIDTA Property Receipt Form) with your request. *If this form is not attached to your request then the request cannot be processed.*

LINE BY LINE INSTRUCTIONS:

ITEM #	INSTRUCTIONS
1.	Please give agency name as listed in the Appalachia HIDTA budget.
2.	Please provide the name of the person in charge of preparing the request for reimbursement for your agency.
3.	Provide the phone number of the person preparing the form.
4.	Give the address that all correspondences regarding HIDTA should be sent.
5.a	The HIDTA subaward number is for 2022 is G22AP0001A.
5.b.	Please number your requests sequentially using any system that works best for you.
6.	Budgets for all agencies are broken down into initiatives. Refer to your budget to verify which initiative your agency has money budgeted. Indicate on this line the proper initiative for which you are requesting reimbursement. A separate form LC-07 is required for each initiative.
7.	Indicate the budget year for this request (i.e. Calendar Year 2022 is budget year 2022.).
8.	Enter the month, day, and year for the beginning and ending of the period covered in this request. Once a request for a particular period has been requested that same period should not be requested again without written justification.
9. (a – i)	Insert the proper account number and amount for the expenditures you are requesting. The account numbers are forwarded to your agency each year along with the sub-grant agreement, and are revised each time a budget reprogramming is completed.
	This form must be signed and dated by an authorized certifying official for the requesting agency.