

GOVERNOR'S TRAFFIC SAFETY BUREAU

HSP-2 CLAIM FOR REIMBURSEMENT

CHECKLIST

This checklist is provided to assist you when preparing to submit HSP-2 Claims for Reimbursement to the Governor's Traffic Safety Bureau. Check each item being submitted and make sure to include the proper number of copies.

_____ **HSP-2 Form - Claim For Reimbursement** ***REQUIRED ON ALL CLAIMS***

- **1 Signed ORIGINAL** (No Faxes or Copies, Must Have Original Signature)
- **4 Copies**

_____ **SUPPORTIVE DOCUMENTATION OF EXPENSES** (one copy only)

_____ **OVERTIME:** Evidence that services were performed and paid for:

- GTSB Form #32 Overtime Spreadsheet SIGNED by Supervisor, Chief or Sheriff with summary of date(s) and hour(s) worked
- Check Stub or Payroll or Check Register proof of payment

_____ **EQUIPMENT:** Evidence that equipment has been received and paid for:

- Copy of Invoice verifies date equipment was ordered
- Copy of Check proof payment was made
- GTSB Form #26 HSP-3 Equipment Accountability with equipment details (2 copies)
- Equipment Photo (portion showing serial # - digital photo can be e-mailed to P.A.)

_____ **EDUCATIONAL MATERIALS:** Evidence goods have been received and paid for:

- Copy of Invoice verifies date materials were ordered
- Copy of Check proof payment was made
- Copy of the traffic safety message as printed on educational materials

For assistance, call Financial Manager Beth Chipp at 515-725-6130

GTSB Form 39 - Claim Checklist