## **EDUCATION SERVICE CENTER, REGION 12**

## Non-Educational Community-Based Support Services Funding Reimbursement Form

Program Period: September 1, 2018 – August 31, 2019

| District Name:                        |                             |   |          |    |  |
|---------------------------------------|-----------------------------|---|----------|----|--|
| Period Covered in this Report:        |                             |   |          |    |  |
| Student Name:                         |                             |   | <u>.</u> |    |  |
| Fund: 392                             |                             |   |          |    |  |
| Service Date(s)                       | Service Code                | Service Provider  | Amount   |    |  |
|                                       |                             |   |          |    |  |
|                                       |                             |   |          |    |  |
|                                       |                             |   |          |    |  |
|                                       |                             |   |          |    |  |
|                                       |                             |   |          |    |  |
|                                       |                             |   |          |    |  |
|                                       |                             | Total   | \$       |    |  |
| · · · · · · · · · · · · · · · · · · · | udit of these expenditure   | ement is requested are allo<br>s the district will not hold E<br>hed.         | •        | in |  |
| Authorized Representativ              | e of the District/Fiscal Aફ | gent:   |          |    |  |
| Contact Information (Wo               | k/cell/email):              |   | Date:    |    |  |
|                                       | ent to ESC Region12, ATT    | mber 15, 2019 will not be h<br>TN: Carla Basham, P.O. Box<br>asham@esc12.net. | ·        | or |  |
| For ESC 12 Use Only:                  |                             |   |          |    |  |
| Date Received: Approved by:           |                             |   |          |    |  |
| \$Amount Budget 392                   |                             |   |          |    |  |

## **EDUCATION SERVICE CENTER, REGION 12**

## 2018-2019 Non-educational Community-based Support Services Funding Program Reimbursement Procedure (ESC Region 12 Fiscal Agent)

ESC Region 12 will reimburse Participating Districts for certain approved program costs associated with the provision of certain Non-educational Community-Based Support Services to students with an approved application on file with ESC Region12. The reimbursable costs are limited to costs for those services listed below.

| 1. Respite Care                           | 7. Family Support           |  |
|---|-----------------------------|--|
| 2. Attendant Care                         | 8. Family Dynamics Training |  |
| 3. Psychiatric/Psychological Consultation | 9. Generalization Training  |  |
| 4. Management of Leisure Time             | 10. Peer Support Group      |  |
| 5. Socialization Training                 | 11. Parent Support Group    |  |
| 6. Individual Support                     | 12. Transportation          |  |

The Texas Education Agency has refined the reporting requirements for reimbursement of program funds to schools through ESCs. These requirements include a review of the expenditures for which reimbursement is requested. To meet this requirement, each Participating District must submit with the Request for Reimbursement, documentation to support the request. The district should record revenues and expenditures in its accounting system in Fund 392, FAR Revenue Code 5852. These are state funds.

Each month the district may submit, on the Reimbursement Request Form, the amount to be reimbursed. Copies of invoices or time sheets with proof of payment (copy of check or general ledger printout) must accompany the request for reimbursement in order for ESC 12 to process payment.

Following receipt and review of the request for reimbursement, payment will be initiated. Payment should be received within 30 days of submission.

The final reimbursement request should be submitted by September 15, 2019.

Reimbursement can only be made for allowable expenditures during the period of September 1, 2018 and August 31, 2019. Requests for Reimbursement received after September 15, 2019 will not be honored. Request for Reimbursement may be sent to ESC Region12, ATTN: Carla Basham, P.O. Box 23409, Waco, TX 76702 or FAX to Carla Basham at 254.666.0823 or email cbasham@esc12.net.

If you have any questions, please contact John C. Bullion at 254.297.1150 or jbullion@esc12.net.