



PLACER OPERATIONAL AREA GRANT

TRAINING/EXERCISE REIMBURSEMENT CHECKLIST

Please collect documentation listed on the checklist below and remit package to:
Placer County Office of Emergency Services (grants@placer.ca.gov)

Agency Information:

Agency Name:

Agency Address:

Agency Contact Name/Email:

Grant:

Grant Year:

Project Title/Number:

Project Cost:

Required Documentation:

Page Number

- Invoice from Second-Tier Sub-Recipient to Placer County
- Invoice from Vendor to Second-Tier Sub-Recipient
- Travel Expense Supporting Documentation
- Certificates of Rosters
- Proof of Payment to vendor by Second-Tier Sub-Recipient
- Overtime and/or Backfill Documentation
- Other Supporting Documentation

Address Invoices to:

Placer County Office of Emergency Services

Accounts Payable

175 Fulweiler Ave.

Auburn, CA 95603

grants@placer.ca.gov

Placer OES Use:

OK to Pay Amount:

Coding/PO Number: