CLEANUP FUND GRANT/LOAN PROGRAM –
REIMBURSEMENT REQUEST SUBMITTAL INSTRUCTIONS for
SWRCB 140

Grantee/Borrower to Complete This Section Only

**THIS SECTION TO BE COMPLETED BY THE GRANTEE/BORROWER**

<table>
<thead>
<tr>
<th>Invoice Date</th>
<th>Vendor Reference No(s)</th>
<th>SWRCB Invoice No</th>
<th>Amount Requested</th>
<th>Final Invoice</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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</tbody>
</table>

6) **Select Reimbursement Option:**

- [ ] 1. Checks made payable to: **GRANTEE/BORROWER AND CONTRACTOR BELOW**:
  - Contractor Name
  
- [ ] 2. Checks made payable to: **GRANTEE/BORROWER (ONLY)**
  
I certify that the costs claimed in this Grant Invoice have been incurred and have been paid or will be paid within thirty (30) days of receipt of the funds requested hereby. Pursuant to Exhibit B of the Agreement, if such costs have not been paid within thirty (30) days, funds received under this request will be returned to the State Water Board.

I certify that all amounts on this invoice are for costs incurred for the Project and represent only costs directly related to the Agreement and within the approved scope of work. These records can be requested at any time for auditing purposes to ensure costs are justified and directly related to the Project.

Granatee/Borrower (Print Name) 
Signature 
Date

1) Invoice Date
   a. Invoice date should be the date the recipient is submitting the Form 140, not the contractors invoice date.
   b. Invoice Date must match the date the grantee signed.

2) Vendor Reference No(s)
   a. This is the contractors invoice number

3) SWRCB Invoice No
   a. This is the Water Boards invoice number and should be submitted in order.
   b. Format: (Reimbursement Request # - Agreement Number) Note: Your agreement number can be found on the first page of your Grant/Loan Agreement
   c. Example
      i. First submission: 01-D123456789
      ii. Second submission: 02-D123456789

4) Amount Requested
   a. Amount of reimbursement request.

5) Final Invoice
   a. Check the box if the request is the final invoice.

6) Reimbursement Option
   a. Select option 1 and enter the name of the contractor if the recipient would like a two-party check issued.
   i. Recipient must include a **STD 204 completed by their contractor** with the SWRCB 140 submission for Fund staff to keep on file if this option is selected.
b. Select option 2 if the recipient would like check issued only to the recipient.

7) Complete Grantee/Borrower name and date. Click on the signature field to be prompted to electronically sign.

Submittal Options

1) Recipient mails in SWRCB 140 with original wet signature and all backup documentation
2) Recipient emails SWRCB 140 with digital signature with all backup documentation (preferred)
   a. Recipient does not need to mail any documents to the SWRCB if this option is selected.