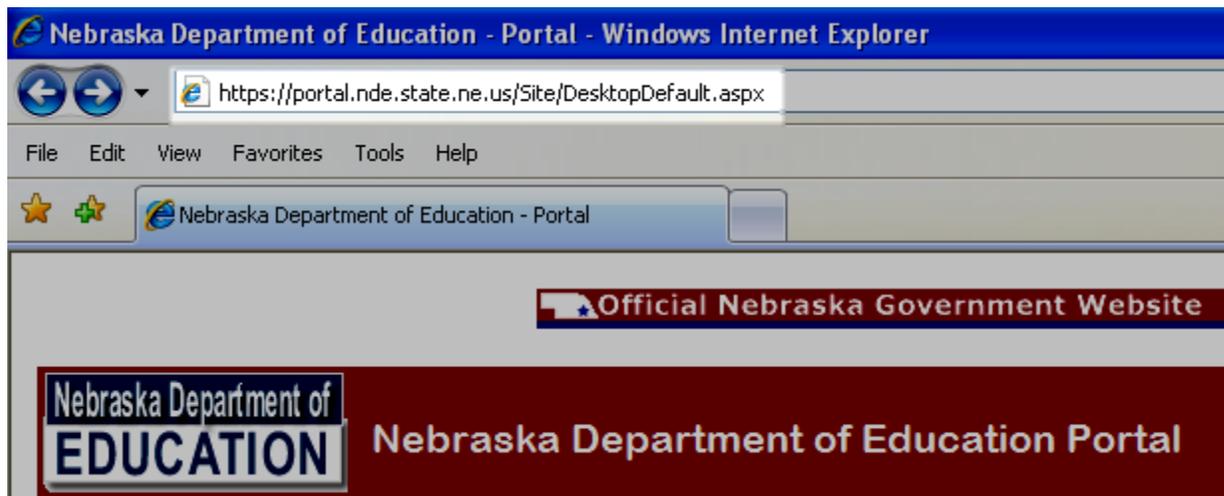


INSTRUCTIONS for completing the GMS Application for Reimbursement of Distance Education Hardware, Software, and/or Installation Expenditures

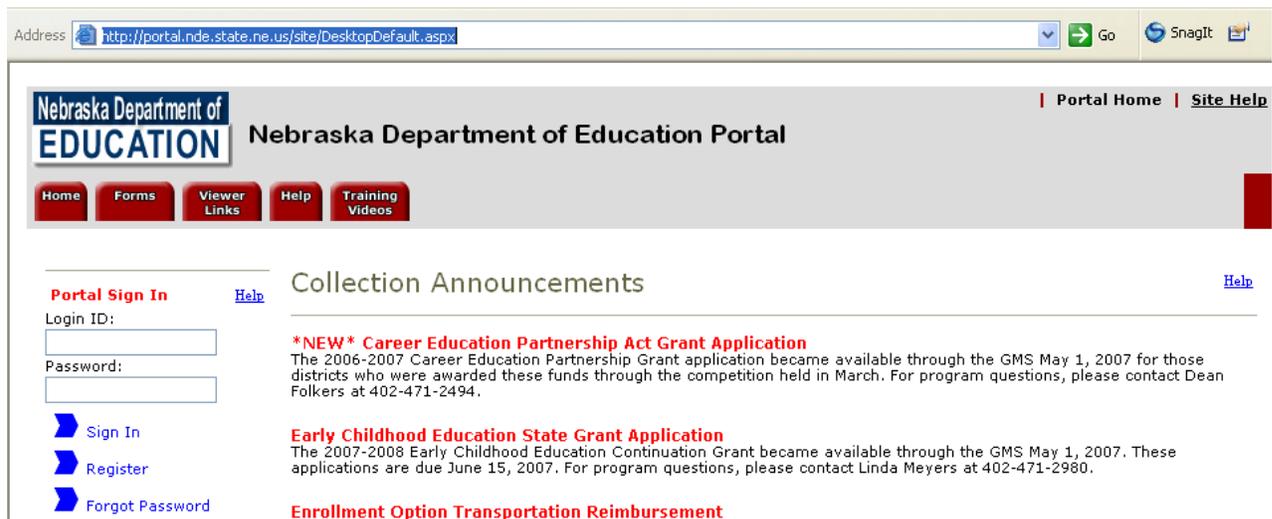
Note: A visual representation of what you will see on you computer screen follows each step or set of instructions. The exact text may vary based on text specific to each location i.e. district information.

1. To access the application process the designated district or ESU official must login into the NDE Portal at <http://portal.nde.state.ne.us>



2. To begin the application process the designated district or ESU official must login into the NDE Portal with a valid **Login ID** and **Password**.

Most district administrators and ESU administrators already have a “login” and “password”. If you are new to the NDE Portal click the register link. For assistance, contact the NDE Help Desk by calling toll free at 888-285-0556 or at the local number 402-471-3151. You can also send an email to helpdesk@nde.ne.gov



3. Once logged into the portal click on the GMS tab:



4. In the NDE Grants Management System (GMS) portion of the Portal will list the programs to which you have access. There are two sections on this page. The first section labeled “Available” is for programs to which you already have access privilege. Click on the [Dist Ed Equip Reimb Grant](#) link if it is listed in this section. If not read the next paragraph.

The second section labeled “Online” lists programs that you will need to enter an activation code to gain authorization. If you are a “designee” of a district or ESU applying for the DL reimbursement grant, click the “Apply” link. Your administrator will distribute the needed activation code(s) so you may access specific sections of the GMS. Once you have entered the code, you will need to click the “Add” button. Then click “Return to the previous page” link so you can click on the [Dist Ed Equip Reimb Grant](#) link, which will now be “Available”.

The screenshot shows the 'Grants Management System' interface. At the top right is a 'Page Help' link. Below the title, there are two sections:

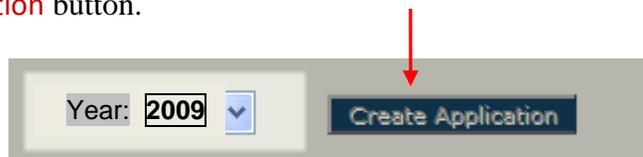
Available (circled in red): You have access to this online Grant. Please proceed by clicking on the name in Grant Name/Link column.

| Status | Request | Grant Name/Link | Note |
|-----------|------------------------|--|---|
| Available | Change | Career Ed Partnership Grant | Career Education Partnership Act (CEPA) |
| Available | Change | Dist Ed Equip Reimb Grant | Distance Education Equipment Reimbursement Grant |
| Available | Change | Early Childhood State Grant | Early Childhood State Grant |
| Available | Change | NCLB Consolidated Application | Applications for: Titles I-A, I-C (Migrant), II-A, II-D, III-LEP, III-Immigrant Ed, IV, V |
| Available | Change | Perkins Basic/TP/PostSecondary | Perkins Basic, Tech Prep and Post Secondary Grants |
| Available | Change | Perkins Innovation Grant | Perkins Innovation Competitive Grant |
| Available | Change | Title I Accountability | Title I school improvement funds for schools not making adequate yearly progress |

Online (circled in red): Enter your Activation Code for access to a Grant by clicking on 'Apply' under Request.

| Status | Request | Grant Name | Note |
|---------|-----------------------|--|--------------------------|
| Offline | Apply | Grid Tool - NDE use only | Grid Tool - NDE use only |
| Offline | Apply | MrKinney-Vento Homeless Ed. Assistance | |

5. Create your application by clicking on the pull down a menu to select the current funding year, then click the [Create Application](#) button.



6. Progress through the application by reading through and entering information categorized by the beige tabs across the page beginning with the **Overview** tab. Click the tab to access the page containing the data fields for that topic or section.

Reimbursement for Distance Education Hardware and Software - Overview

Reimbursement for Distance Education Hardware and Software:
 For fiscal years 2007-08 through 2013-14, the State Department of Education shall provide distance education equipment reimbursement to school districts and Educational Service Units from the Education Innovation Fund as provided in section 79-1336 R.R.S.
 Applications shall be submitted on or before July 1 of each year through the Grants Management System.
 On or before August 1 of each year, the department shall certify the reimbursements to be paid to each school district or educational service unit on or before September 1 of each year, along with notice of denial of any requested reimbursement to the affected school districts or educational service units and the reasons thereof.
 Such reimbursements shall be for hardware, software and/or installation purchased after July 14, 2006, for use in distance education and shall be limited to a total through fiscal year 2013-14, of twenty thousand dollars (\$20,000) multiplied by the number of high school buildings for each school district and twenty thousand dollars (\$20,000) for each Educational Service Unit.

Nebraska Department of Education Contacts:
Program Contact: Mike Kozak
 402-471-0533
 mike.kozak@nde.ne.gov
Financial Contact: Henry Rodriguez
 402-471-4313
 henry.rodriguez@nde.ne.gov

7. The **Allocations** tab will indicate the total distance education equipment reimbursement allocation available for your organization.

Allocations

| | DistEd |
|--------------------------------|---------------|
| Current Year Allocation | \$20,000 |
| ReAllocated Funds (+) | 0 |
| Released Funds (-) | 0 |
| Carryover (+) | 0 |
| SUB TOTAL | \$20,000 |
| Cooperative/Consortia | |
| Transfer In (+) | 0 |
| Transfer Out (-) | 0 |
| Fiscal Agent | |
| ADJUSTED SUB TOTAL | \$20,000 |
| TOTAL FUNDS AVAILABLE | \$20,000 |
| | DistEd |

8. The **Program Information** tab has two sub-tabs to be completed. First is **Contact Information**. All blanks in **Contact Information** must be completed and contain properly formatted data (such as a valid email address). After entering the appropriate information in the text boxes, click the **Save** button. If any information is not complete a message will appear in red text indicating errors that will need to be corrected before moving forward. Edit as appropriate and click the **Save** button again.

| | | | | | |
|----------|-------------|---------------------|--------|------------|--------|
| Overview | Allocations | Program Information | Budget | Assurances | Submit |
|----------|-------------|---------------------|--------|------------|--------|

Reimbursement for Distance Education Hardware and Software - Contact Information

Authorized Representative: (NDE considers the Superintendent to be the Authorized Representative) Fields with an * are required.

First Name*

Last Name*

Phone* Extension

E-Mail*

Fax*

Grant Contact:

First Name*

Last Name*

Phone* Extension

E-Mail*

Fax*

Financial Contact:

First Name*

Last Name*

Phone* Extension

E-Mail*

Fax*

9. Click the tab labeled **Program Goals and Needs**. Enter in the text box a description of the hardware, software, and/or contracted services costs for which you are seeking reimbursement. Be specific as to what these costs are and how they are utilized to enhance distance education. Click **Save Page** when finished.

NOTE: Items purchased should be listed and described with enough detail to provide evidence that the items will enhance the distance education opportunities for students at your site(s). NDE will contact the organization for further clarification should additional explanation be needed.

| | | | | | | | |
|----------|-------------|---------------------|--------|------------|--------|---------------------|-------------------|
| Overview | Allocations | Program Information | Budget | Assurances | Submit | Application History | Page Lock Control |
|----------|-------------|---------------------|--------|------------|--------|---------------------|-------------------|

Reimbursement for Distance Education Hardware and Software - Program Goals and Needs [Instructions](#)

*Provide a description of the hardware, software and/or installation purchased and how these purchases will be used for distance education. (2,500 character limit maximum which includes spaces.) Fields with an * are required.
 Comment (97 of 2500 maximum characters used)

Applying for distance ed equipment reimbursements - I've spend \$18K on routers and a polycom cart

10. Click the **Budget** tab. The first sub-tab is titled, **Budget Detail**. The system will display the Budget Breakdown in which to identify expended funds by activity and object code.

NOTE: To avoid a possible entry error, use the **Function Code** pull down menu entering requests in **numerical order** [01-Software, 02-Hardware, etc.] when listing expenses to be reimbursed. If an error occurs, the GMS system will list errors in red text (after click the save page button) if activities are listed incorrectly or “out of order”.

| Function codes | Expenditure Account Column |
|-------------------|--|
| 01 - Software | 400 – Supplies & Materials/Computer Software |
| 02 - Hardware | 500 – Computer Hardware / Equipment |
| 03 - Installation | 300 – Purchased Service / Lease Agreement |
| 04 - Carryover | 600 - Travel / Professional Development |

NOTE: Because the GMS system was not built to handle carry over funds in the manner that this program requires, the *work around* is to place them in the **600 Function Code**, which is not a valid function for only this reimbursement program. This is merely a placeholder process to assure any funds not requested for reimbursement at this time will be available during the next filing window.

After entering the amounts to be reimbursed, click **Calculate Page Totals** and **Save Page** after each line activity entry.

Budget Detail BUDGET BREAKDOWN (Use whole dollars only. Omit Decimal Places, e.g., 2536) Instructions

Total Allocation Available for Budgeting \$20,000

Buy equipment to run a valid dl classroom

| Function Code | 100 - Salaries | 200 - Employee Benefits | 300 - Purchased Service / Lease Agreement | 400 - Supplies & Materials / Computer Software | 500 - Computer Hardware / Equipment | 600 - Travel / Professional Development | Total DistEd-3511 Funds | Delete Row |
|------------------|----------------|-------------------------|---|--|-------------------------------------|---|-------------------------|--------------------------|
| 01-Software | 0 | 0 | 0 | 5000 | 0 | 0 | \$5,000 | <input type="checkbox"/> |
| 02-Hardware | 0 | 0 | 0 | 0 | 12000 | 0 | \$12,000 | <input type="checkbox"/> |
| 04-Carryover | 0 | 0 | 0 | 0 | 0 | 3000 | \$3,000 | <input type="checkbox"/> |
| | 0 | 0 | 0 | 0 | 0 | 0 | \$0 | <input type="checkbox"/> |
| | 0 | 0 | 0 | 0 | 0 | 0 | \$0 | <input type="checkbox"/> |
| | 0 | 0 | 0 | 0 | 0 | 0 | \$0 | <input type="checkbox"/> |
| Sub Total | \$0 | \$0 | \$0 | \$5,000 | \$12,000 | \$3,000 | \$20,000 | |

Create Additional Entries

| | | | | | | | | |
|---------------|-----|-----|-----|---------|----------|---------|----------|--|
| TOTALS | \$0 | \$0 | \$0 | \$5,000 | \$12,000 | \$3,000 | \$20,000 | |
|---------------|-----|-----|-----|---------|----------|---------|----------|--|

Determining Maximum Indirect Cost allowed

(A) Total Allocation Available for Budgeting \$20,000 (F) Total budgeted above \$20,000

11. Click the **Budget Summary** tab. The amounts entered into the **Budget Detail** page will appear and unused sections will be blocked out. This is a read only page to double check all entries and totals.

| | | | | | | | |
|---------------------------|-------------------------|-------------------------|---|--|-------------------------------------|---|-------------------|
| Overview | Allocations | Program Information | Budget | Assurances | Submit | Application History | Page_Lock Control |
| Budget Detail | | | | Budget Summary | | | |
| Budget (Read Only) | | | | | | | |
| Activity Description | Expenditure Object Code | | | | | | |
| | 100 - Salaries | 200 - Employee Benefits | 300 - Purchased Service / Lease Agreement | 400 - Supplies & Materials / Computer Software | 500 - Computer Hardware / Equipment | 600 - Travel / Professional Development | TOTAL |
| Software | | | | | | | |
| Hardware | | | | | 18,000 | | 18,000 |
| Installation | | | | | | | |
| Carryover | | | | | | 2,000 | 2,000 |
| Total Object Code | | | | | 18,000 | 2,000 | 20,000 |
| | | | | | | | 20,000 |

12. Click the **Assurances** tab. Read through the statements of assurances. Click the appropriate radial button to indicate compliance with these statements.

| | | | | | | | |
|--|-------------|--|--------|------------|--------|------------------------------------|-------------------|
| Overview | Allocations | Program Information | Budget | Assurances | Submit | Application History | Page_Lock Control |
| Reimbursement for Distance Education Hardware and Software - Assurances | | | | | | | |
| In order to submit your application, the authorized representative for your organization must click the Organization Approves button at the bottom of this page. By clicking this button, the authorized representative is agreeing to the following assurances: | | | | | | | |
| <ol style="list-style-type: none"> For school districts, a commitment to either send or receive two-way interactive video distance education courses through the Distance Education Council until July 1, 2008, and the Educational Service Unit Coordinating Council on and after July 1, 2008, each semester, or the equivalent of two semester courses each year, for four consecutive years and to apply for distance education incentives pursuant to section 79-1313, or to provide any other evidence required by the department to show that the commitment was met. The district will retain all records of distance education courses sent or received for five years after termination of reimbursement provided an audit under 79-1089 R.R.S. has been completed to show that the commitment was met. To comply with Nebraska Department of Education Rule 89, the Regulations for the Education Innovation Fund grant. Activities described herein will be conducted in accordance with applicable state and federal statutes and regulations, including those concerning non-discrimination, prohibitions against lobbying, suspension, and debarment, the provision of a gun-free, drug-free and smoke-free work place, and access for persons with disabilities. To notify the Department of Education, in writing and through the Grants Management System (GMS), of changes in management staff and/or contact person(s). Copies of receipts and/or documentation from the district's accounting system detailing hardware, software and/or installation purchases to be reimbursed will be attached through the department's online grants management payment system or indicated within the grants management system (GMS) as sent to NDE via mail. | | | | | | | |
| <input type="text" value="da_Holdrege"/> <input type="text" value="sw_da"/> | | Signature of School District Superintendent Signature of Board-Certified Delegated Authority for the School District Superintendent | | | | Agreed to on this Date: 03/05/2009 | |

13. Click the **Submit** tab. Click the **Consistency Check** button to electronically check the application for errors. When this step is complete the application will be locked and ready for submission to NDE. If errors are displayed in red text, click the unlock application button and make revisions as indicated in the consistency check report.

| | | | | | | | | |
|---|-------------|---|---------------------|--------|------------|--------|---------------------|-------------------|
| NEBRASKA Department of Education | | GMS Grants Management System | | | | | | |
| District Name: NORFOLK PUBLIC SCHOOLS | | Distance Education Equipment Reimbursement-3511 | | | | | | |
| Project Number: 08-3511-00-08-059-0002-11 | | Application: Amendment 1 | | | | | | |
| Overview | Allocations | Contact Information | Program Information | Budget | Assurances | Submit | Application History | Page_Lock Control |
| Submit | | | | | | | | |
| <p style="color: red; text-align: center;">The Consistency Check must be successfully processed before you can submit your application.</p> <p style="text-align: center;"> <input type="button" value="Consistency Check"/> <input type="button" value="Lock Application"/> <input type="button" value="Unlock Application"/> </p> | | | | | | | | |

14. After successful completion of the Consistency Check, click the Submit to NDE button.

The screenshot shows the NEBRASKA Department of Education GMS interface. At the top, it displays the logo and 'Grants Management System'. Below the header, the 'District Name' is 'NORFOLK PUBLIC SCHOOLS' and the 'Project Number' is '08-3511-00-08-059-0002-11'. The 'Application' is 'Original Application' for 'Distance Education Equipment Reimbursement-3511'. A navigation bar contains buttons for Overview, Allocations, Contact Information, Program Information, Budget, Assurances, Submit (circled in red), Application History, and Page_Lock Control. Below this, the 'Submit' section displays the message 'The application has not been submitted.' and an 'Unlock Application' button. A table shows dates for Assurances (5/17/2007) and Consistency Check (5/7/2007). A 'Submit to NDE' button is highlighted with a red arrow.

15. GMS will display “The application has been submitted for review” and a dates will appear indicating when the submission processes had taken place.

The screenshot shows the NEBRASKA Department of Education GMS interface after submission. The navigation bar is the same as in the previous screenshot. The 'Submit' section now displays the message 'The application has been submitted for review.' A table shows dates for Assurances (5/17/2007), Consistency Check (5/7/2007), and District Administrator submission (5/17/2007). The dates are circled in red. A 'Note' at the bottom states: 'Note: If amending, please indicate which programs were changed'. Below the note is a text area for 'LEA Comments:'.

- 16.** You can login to GMS anytime to see the status of the application. Click the **Application History** tab. Additional information will be displayed as the application goes through NDE Review and NDE Leadership Council Approval.

| Status Change | UserId | Action Date |
|----------------------|--------|-------------|
| Final Approved | kozak | 03-25-2009 |
| In Process | witts | 03-25-2009 |
| Submitted to NDE | sw_da | 03-25-2009 |
| Returned for Changes | witts | 03-25-2009 |
| Submitted to NDE | sw_da | 03-25-2009 |

Userid: sw_da

- 17.** Once the application goes through final approval from the designated NDE Leadership Council member an email will automatically be generated and sent to your organization's GMS administrator. Information on the **Submit** tab will also indicate the date approved.

The application has been approved.

Assurances were agreed to on: 3/5/2009

Consistency Check was run on: 3/25/2009

Data Entry: 3/25/2009

District Administrator submitted the application to NDE on: 3/25/2009

NDE Reviewer approved the application on: 3/25/2009

NDE Leadership Review approved the application on: 3/25/2009

Note: If amending, please indicate which programs were changed

LEA Comments:

NDE Comments:

Once the application is approved, you must still request payment!

Instructions continue on the next page for requesting payment.



- 18.** Return to the GMS system and login as described in Steps 1-4 above. Select the application by clicking the radial button, then click on the **Payments** button.

NEBRASKA Department of Education GMS Grants Management System

District Name: AINSWORTH COMMUNITY SCHOOLS ESU/County District: 17-009-0010-16

Application Select Instructions

Select an application from the list(s) below and press one of the following buttons:

Open Application Create Amendment **Payments** Print All Withdraw Application/Amendment Review Checklist

| Select | Application / Amendment | Original Submit Date | NDE Final Approval Date | Status | Status Date | Consulting |
|----------------------------------|--|----------------------|-------------------------|----------------|-------------|------------|
| 2009-2010 | | | | | | |
| <input checked="" type="radio"/> | 10-DistEd-3511-00 Original Application | 03-19-2009 | 03-25-2009 | Final Approved | View GAN | 03-25-2009 |
| 2008-2009 | | | | | | |
| <input type="radio"/> | 09-DistEd-3511-00 Original Application | 06-19-2008 | 06-20-2008 | Final Approved | View GAN | 06-20-2008 |
| 2007-2008 | | | | | | |
| <input type="radio"/> | 08-DistEd-3511-00 Original Application | 06-26-2007 | 07-16-2007 | Final Approved | View GAN | 07-16-2007 |

Userid: sw_da

NOTE: You can click the **View GAN** link to see the Grant Award Notification (GAN) document in .pdf form. The GAN .pdf file will automatically be sent to the district or ESU administrator email address provided and is the official “certification” for the Distance Education Equipment Reimbursement from NDE.

- 19.** The **Payment Summary** page is presented. Click the **View Reimbursement Requests/Financial Reports** button to open the **Reimbursement Request**.

NEBRASKA Department of Education GMS Grants Management System

Payment Summary Instructions

District Name: AINSWORTH COMMUNITY SCHOOLS ESU/County District: 17-009-0010-16

Back to Application Select
View Payment Instructions
View Payment Questions and Answers

2010 Distance Education Equipment Reimbursement-3511 **View Reimbursement Requests/Financial Reports**

Payment Summary as of 4/9/2009

| | DistEd | Total |
|--|----------|----------|
| Current Year Allocation | \$20,000 | \$20,000 |
| (+/-) Adjustments | \$0 | \$0 |
| (+/-) Multidistrict | \$0 | \$0 |
| (+/-) Transfers | \$0 | \$0 |
| Total Funds Available | \$20,000 | \$20,000 |
| Approved Budget -- Original Application | \$20,000 | \$20,000 |
| Available for Payments | | |
| Scheduled | \$0 | \$0 |
| Reimbursement | \$20,000 | \$20,000 |
| Total | \$20,000 | \$20,000 |

20. Select the application by clicking the appropriate radial button, then click **Create New Request**.

NEBRASKA Department of Education **GMS** Grants Management System

Reimbursement Request/Financial Report Select [Instructions](#)

District Name: AINSWORTH COMMUNITY SCHOOLS ESU/County District: 17-009-0010-16

[Back to Application Select](#)
[Back to Payment Summary](#)
[View Payment Instructions](#)
[View Payment Questions and Answers](#)

Reimbursement Requests:

| Select | Reimbursement Request | Program(s) | Date Created | Date Submitted | Financial Approval Date | Status | History |
|----------------------------------|-------------------------|---------------|--------------|----------------|-------------------------|------------------|------------------------------|
| 2010 <input type="checkbox"/> | Reimbursement Request 1 | DistEd-NS (F) | 3/25/2009 | 3/27/2009 | | Submitted to NDE | View History |

21. Some of the LEA Contact information should automatically appear. Complete missing information as needed. Check the box **Select here to add a report for this program**.

NEBRASKA Department of Education **GMS** Grants Management System

Reimbursement Request [Instructions](#)

District Name: AINSWORTH COMMUNITY SCHOOLS ESU/County District: 17-009-0010-16

[Back to Application Select](#)
[Back to Financial Menu](#)
[View Payment Instructions](#)
[View Payment Questions and Answers](#)

LEA Contact:
 First Name: Last Name:
 Phone: Ext:
 Email Address:

2010 Distance Education Equipment Reimbursement-3511

DistEd-3511 [Select here to add a report for this program](#)

Enter expenditure amounts and save prior to submission

Attach Document

22. The page will “refresh” and the window will expand to show the Expenditure Object Codes and Projected Grant Closeout Summary (below).

23. Even if you have carryover, check the box **Select here if this is the Final Reimbursement Request.**





Reimbursement Request
Instructions

District Name: NORFOLK PUBLIC SCHOOLS
ESU/County District: 08-059-0002-11

[Back to Application Select](#)
[Back to Financial Menu](#)
[View Payment Instructions](#)
[View Payment Questions and Answers](#)

LEA Contact:

First Name: Last Name:

Phone: Ext:

Email Address:

2008 Distance Education Equipment Reimbursement-3511

DistEd-3511 **Select here to add a report for this program**
Actual Expenditures YTD must be entered

Object Code Summary: **Select here if this is the Final Reimbursement Request**
Enter whole dollar amounts only

| Expenditure Object Code | Budgeted | Submitted Expenditures YTD 1 | Scheduled Payments YTD | Remaining for Expenditure/ Payment | Actual Expenditures YTD | (Overpaid)/ Underpaid |
|--|-----------------|------------------------------|------------------------|------------------------------------|-------------------------------------|-----------------------|
| 100 - Salaries | \$0 | \$0 | \$0 | \$0 | <input type="text" value="\$0"/> | \$0 |
| 200 - Employee Benefits | \$0 | \$0 | \$0 | \$0 | <input type="text" value="\$0"/> | \$0 |
| 300 - Purchased Service / Lease Agreement | \$5,000 | \$0 | \$0 | \$5,000 | <input type="text" value="\$5000"/> | \$0 |
| 400 - Supplies & Materials / Computer Software | \$5,000 | \$0 | \$0 | \$5,000 | <input type="text" value="\$5000"/> | \$0 |
| 500 - Computer Hardware / Equipment | \$10,000 | \$0 | \$0 | \$10,000 | <input type="text" value="\$8000"/> | \$0 |
| 600 - Travel / Professional Development | \$0 | \$0 | \$0 | \$0 | <input type="text" value="\$2000"/> | \$0 |
| Totals: | \$20,000 | \$0 | \$0 | \$20,000 | \$0 | \$0 |

1 - Submitted Expenditures YTD does not include line items on this Reimbursement Request / Closeout

Projected Closeout Payment \$0

Projected Grant Closeout Summary

| Amount | Amount |
|---|----------|
| Approved Budget | \$20,000 |
| Total of Payments Against Grant (includes Projected Closeout Payment) | \$0 |
| Unexpended Budget | \$20,000 |
| Maximum Amount That Can Be Carried Over (0% of current allocation) | \$0 |
| Funds Transferred to Next Year for Agency | \$0 |
| OR <input type="checkbox"/> Release remaining funds to NDE (By selecting this box, funds are not transferred to next year.) | \$0 |
| Excess Funds Released to NDE | \$20,000 |

Note: Unused REAP/6123 transfer funds will be returned to original program

Add Comment to NDE

Add Comment to LEA

Enter expenditure amounts and save prior to submission

Attach Document

Check here if documentation has been sent to NDE via Mail

I Certify that, to the best of my knowledge and belief, this report is true and correct in all aspects: supporting documentation for all entries in the accounting records are on file and will be retained for five (5) years or until the Applicant is notified that such records are no longer needed for administrative review; and the federal funds have been expended only for the purposes they were granted.

For additional information please contact the Nebraska Department of Education
Contact Us

24. Double check all expenditures. Money marked as “carryover” will be available for future reimbursement to your organization through 2013-14 per statute.

Reimbursement Request
Instructions

District Name: NORFOLK PUBLIC SCHOOLS
ESU/County District: 08-059-0002-11

[Back to Application Select](#)
[Back to Financial Menu](#)
[View Payment Instructions](#)
[View Payment Questions and Answers](#)

LEA Contact:

First Name: Last Name:

Phone: Ext:

Email Address:

2008 Distance Education Equipment Reimbursement-3511

DistEd-3511 **Select here to add a report for this program**
Actual Expenditures YTD must be entered

Object Code Summary: **Select here if this is the Final Reimbursement Request**
Enter whole dollar amounts only

| Expenditure Object Code | Budgeted | Submitted Expenditures YTD 1 | Scheduled Payments YTD | Remaining for Expenditure/ Payment | Actual Expenditures YTD | (Overpaid)/ Underpaid |
|--|----------|------------------------------|------------------------|------------------------------------|--|-----------------------|
| 100 - Salaries | \$0 | \$0 | \$0 | \$0 | \$0 <input type="text" value="0"/> | \$0 |
| 200 - Employee Benefits | \$0 | \$0 | \$0 | \$0 | \$0 <input type="text" value="0"/> | \$0 |
| 300 - Purchased Service / Lease Agreement | \$5,000 | \$0 | \$0 | \$5,000 | \$5000 <input type="text" value="5000"/> | \$5,000 |
| 400 - Supplies & Materials / Computer Software | \$5,000 | \$0 | \$0 | \$5,000 | \$5000 <input type="text" value="5000"/> | \$5,000 |
| 500 - Computer Hardware / Equipment | \$10,000 | \$0 | \$0 | \$10,000 | \$8000 <input type="text" value="8000"/> | \$8,000 |
| 600 - Travel / Professional Development | \$0 | \$0 | \$0 | \$0 | \$0 <input type="text" value="0"/> | \$0 |
| Totals: | \$20,000 | \$0 | \$0 | \$20,000 | \$18,000 | \$18,000 |

1 - Submitted Expenditures YTD does not include line items on this Reimbursement Request / Closeout

Projected Closeout Payment \$18,000

Projected Grant Closeout Summary

| | |
|---|----------|
| Approved Budget | \$20,000 |
| Total of Payments Against Grant (includes Projected Closeout Payment) | \$18,000 |
| Unexpended Budget | \$2,000 |
| Maximum Amount That Can Be Carried Over (0% of current allocation) | \$0 |
| Funds Transferred to Next Year for Agency | |
| OR <input type="checkbox"/> Release remaining funds to NDE (By selecting this box, funds are not transferred to next year.) | \$0 |
| Excess Funds Released to NDE | \$2,000 |

Note: Unused REAP/6123 transfer funds will be returned to original program

Add Comment to NDE

Add Comment to LEA

Enter expenditure amounts and save prior to submission

Attach Document

Check here if documentation has been sent to NDE via Mail

I Certify that, to the best of my knowledge and belief, this report is true and correct in all aspects: supporting documentation for all entries in the accounting records are on file and will be retained for five (5) years or until the Applicant is notified that such records are no longer needed for administrative review; and the federal funds have been expended only for the purposes they were granted.

For additional information please contact the Nebraska Department of Education
Contact Us

25. Check here if you wish to add a comment when submitting this request.




Reimbursement Request
Instructions

District Name: NORFOLK PUBLIC SCHOOLS ESU/County District: 08-059-0002-11

[Back to Application Select](#)
[Back to Financial Menu](#)
[View Payment Instructions](#)
[View Payment Questions and Answers](#)

LEA Contact:
 First Name: Last Name:
 Phone: Ext:
 Email Address:

2008 Distance Education Equipment Reimbursement-3511

Select here to add a report for this program Actual Expenditures YTD must be entered

Object Code Summary: **Select here if this is the Final Reimbursement Request** Enter whole dollar amounts only

| Expenditure Object Code | Budgeted | Submitted Expenditures YTD 1 | Scheduled Payments YTD | Remaining for Expenditure/ Payment | Actual Expenditures YTD | (Overpaid)/ Underpaid |
|--|----------|------------------------------|------------------------|------------------------------------|-------------------------------------|-----------------------|
| 100 - Salaries | \$0 | \$0 | \$0 | \$0 | <input type="text" value="\$0"/> | \$0 |
| 200 - Employee Benefits | \$0 | \$0 | \$0 | \$0 | <input type="text" value="\$0"/> | \$0 |
| 300 - Purchased Service / Lease Agreement | \$5,000 | \$0 | \$0 | \$5,000 | <input type="text" value="\$5000"/> | \$5,000 |
| 400 - Supplies & Materials / Computer Software | \$5,000 | \$0 | \$0 | \$5,000 | <input type="text" value="\$5000"/> | \$5,000 |
| 500 - Computer Hardware / Equipment | \$10,000 | \$0 | \$0 | \$10,000 | <input type="text" value="\$8000"/> | \$8,000 |
| 600 - Travel / Professional Development | \$0 | \$0 | \$0 | \$0 | <input type="text" value="\$0"/> | \$0 |
| Totals: | \$20,000 | \$0 | \$0 | \$20,000 | \$18,000 | \$18,000 |

1 - Submitted Expenditures YTD does not include line items on this Reimbursement Request / Closeout

Projected Closeout Payment \$18,000

Projected Grant Closeout Summary

| Summary | Amount |
|---|----------|
| Approved Budget | \$20,000 |
| Total of Payments Against Grant (includes Projected Closeout Payment) | \$18,000 |
| Unexpended Budget | \$2,000 |
| Maximum Amount That Can Be Carried Over (0% of current allocation) | \$0 |
| Funds Transferred to Next Year for Agency | |
| OR <input type="checkbox"/> Release remaining funds to NDE (By selecting this box, funds are not transferred to next year.) | \$0 |
| Excess Funds Released to NDE | \$2,000 |

Note: Unused REAP/6123 transfer funds will be returned to original program

Add Comment to NDE

We have \$2000 left of Distance Ed reimbursement funds which we will plan on using for additional software updates as soon as the vendor releases them (possibly in 2009).

Add Comment to LEA

Enter expenditure amounts and save prior to submission

Attach Document

Check here if documentation has been sent to NDE via Mail

I Certify that, to the best of my knowledge and belief, this report is true and correct in all aspects: supporting documentation for all entries in the accounting records are on file and will be retained for five (5) years or until the Applicant is notified that such records are no longer needed for administrative review; and the federal funds have been expended only for the purposes they were granted.

For additional information please contact the Nebraska Department of Education
[Contact Us](#)

26. Receipts for reimbursement are required to be submitted to NDE, either electronically or by mail. For electronic file submission, click the **Browse** button to navigate and select an electronic receipt(s) file from your computer; or, check the box that documentation is being **sent to NDE via Mail**.

Close up view of section for attaching or sending documentation to NDE:

DistEd-3511 Select here to add a report for this program

Enter expenditure amounts and save prior to submission

Attach Document: C:\Documents and Settings\mkozak\Desktop\Distance

Check here if documentation has been sent to NDE via Mail

I Certify that, to the best of my knowledge and belief, this report is true and correct in all aspects: supporting documentation for all entries in the accounting records are on file and will be retained for five (5) years or until the Applicant is notified that such records are no longer needed for administrative review; and the federal funds have been expended only for the purposes they were granted.

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27. If using the **attach document** option, when the upload is complete, click the **Save Page** button.

Electronic receipts could be a scanned image or digital photograph of the original receipt or a report generated from you organization's accounting system. Picture files and commonly used file formats such as Microsoft Office files are acceptable. These file formats would include, but are not limited to .jpg, .jpeg, .PDF, .png, .xls, and .doc.

A check box is provided to indicate that receipts have been mailed to NDE if the electronic submission of receipts is not attainable.

28. Click the **Re-Calculate Closeout Amounts**. Verify that amounts entered in the YTD expenditures are accurate and match the total of receipts submitted. Finally, click the button **Submit to NDE**. After clicking the **Submit to NDE** button, a text message will appear verifying success.

29. NDE's Financial Services approves the reimbursement request. An email will automatically be sent to the district or ESU GMS Administrator. Payments will be issued on or before September 1st of the current fiscal year.

For technical assistance contact the NDE Help Desk:

Email: helpdesk@nde.ne.gov
Phone: 402-471-3151 or 888-285-0556