COVID-19 Farm Transportation & Sanitation Cost Share Reimbursement Request

Name of Farm or Individual to be reimb	me of Farm or Individual to be reimbursed:					
Address						
City	State: North Carolina Zip					
County:						
Telephone Number (Business)	(Mobile)					
Fmail Address:						

Reimbursement available for the following until funds exhausted:

- \$200/day for 30 days to rent additional vehicles to reduce the number of employees per trip (Maximum of \$6,000/farm)
- \$2,000/farm for purchase of sanitation equipment &/or supplies including:

0	Hand soap or sanitizer dispensers	0	Foot pull door openers	
0	Field sanitation stations	0	Motion lights	
 Sanitation fogging machines 		0	Box fans/air circulation units	
0	Touchless faucets	0	Tents/tarps for outdoor dining areas	
Ask about eligibility for other items				

To receive reimbursement:

ECU requires that you also complete an online ECU Vendor request form. NC Agromedicine Institute will initiate this procedure. You will receive an email invitation from Support@Sciquest.com which will contain a link for you to go online to complete the form and upload your W-9 form. Once this process is complete, you will be set up with a 'Banner ID' — a unique number which will guard your identity and replace your identity and replace your Social Security number or your TIN. Failing to complete this process will void your request for reimbursement.

- Complete itemized reimbursement request on page 2 and provide copy of itemized receipts and vehicle rental agreement, if applicable.
- Return completed reimbursement request form to:



North Carolina Agromedicine Institute Attn: Dr. Robin Tutor Marcom 1157 VOA Site C Road Greenville, North Carolina 27834

For more information contact: Scarlett Joyner <u>joynersc20@ecu.edu</u> 919.581.7977 Robin Tutor Marcom <u>tutorr@ecu.edu</u> 252.744.1008

ITEMIZED REIMBURSEMENT REQUEST

Vehicle Rental (maximum \$200/day x 30 days; \$6,000/farm)	Vehicle Description	# Days Rented	Cost per Day	Total Rental Cost/Vehicle
	Vehicle 1:			
	Vehicle 2:			
	Vehicle 3:			

	Item Description	Quantity	Cost Each	Total Cost
Sanitation Equipment &/Or Supplies (maximum \$2,000/farm)				
	Total Cost All Sai	nitation & Equipm	ent Supplies(B)	
Total Reimb	oursement Request Lines A	A(Transportation)	& B(Sanitation)	

Return completed reimbursement request form with copy of receipts and vehicle rental agreement to:



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