

**DOMESTIC VIOLENCE SHELTER GRANTS (DVSG)  
REQUEST FOR REIMBURSEMENT**  
ND DEPARTMENT OF COMMERCE  
DIVISION OF COMMUNITY SERVICES

**Please Remit to:**  
Adele Sigl  
ND Department of Commerce  
Division of Community Services  
1600 E. Century Avenue, Suite 2  
P.O. Box 2057  
Bismarck, ND 58502-2057  
Phone: (701) 328-2618 / Fax: (701) 328-5320  
[asigl@nd.gov](mailto:asigl@nd.gov)

**Funds will not be disbursed until projects are substantially complete and cash is available in the fund.  
To the extent possible, accumulating and grouping of reimbursement requests would be appreciated.**

Name of Agency		Request Number
Contact Person		Daytime Telephone Number
Bank Name	Bank Account Number	Grant Number
Amount Requested in this Claim ( <b>Attach copies of invoices to document this request</b> ):		\$

**Listing (By Vendor) of Expenses for Construction, Equipment, and Other Purchases Covered by this Grant**

VENDOR	AMOUNT
1.	\$
2.	\$
3.	\$
4.	\$
5.	\$
6.	\$
7.	\$
8.	\$
9.	\$
10.	
<b>TOTAL</b>	\$

Under the penalties of perjury, I swear that the foregoing information is true and correct to the best of my knowledge, information and belief, and that I am duly authorized to conduct business on behalf of the aforementioned political subdivision; and that the requested funds will be used for the stated purpose in accordance with the approved grant documentation.

Signature of Executive Director	Date
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For DCS Use Only		
Approved <input type="checkbox"/> Yes <input type="checkbox"/> No	Authorized Signature	Date