

**Appendix 3
MoDOT HIGHWAY SAFETY DIVISION
MONTHLY CONTRACT REIMBURSEMENT VOUCHER**

REVIEW & APPROVAL BY HIGHWAY SAFETY PROJECT DIRECTOR CONSTITUTES A MONITORING REPORT

GRANTEE AGENCY: Missouri Department of Transportation

MAKE CHECK PAYABLE TO:
(show Consultant name and current address)

STATE VENDOR NUMBER: _____

PERIOD OF CLAIM: FROM: _____ TO: _____

HIGHWAY SAFETY PROJECT #: 09-RS-11-02 TITLE: BEAP PROJECT # 09HSP-__
PROJECT LOCATION: _____

CONTACT NAME: _____ PHONE: _____ EMAIL: _____

PROJECT FINANCIAL SUMMARY

(For a one-time BEAP project submittal, the first, middle and last columns will show the same invoiced amount)

TOTAL COST OF PROJECT INCLUDING GRANTEE MATCH	PERCENT REIMBURSED BY HIGHWAY SAFETY	TOTAL CLAIMED TO DATE	TOTAL PREVIOUSLY VOUCHERED	NET CLAIM THIS PERIOD
	100%		\$0.00	

I certify that, in accordance with the laws of the State of Missouri and under terms of the approved project, actual costs claimed have been incurred for the purposes as defined in the project.

Please SIGN below (written signatures only)

Prepared By Title Date

MoDOT Project Director or Authorizing Official Title Date

**BEAP Consultants - Mail the signed copy of this voucher along with itemized expenses to:
MoDOT, Bridge Division, Attn: Jeff Aholt, P.O. Box 270, Jefferson City, MO 65102**

HIGHWAY SAFETY USE ONLY:												
PROJECT DIRECTOR APPROVAL												
NAME:						LINE	FIXED ASSET	QUANTITY	FUND	AGENCY	ORG.	APPR. UNIT
DATE:						01						
						02						
						LINE	OBJECT	SUB.OBJ	ACTIVITY	FUNCTION	AMOUNT	
AUDIT APPROVAL						01						
						02						
NAME:						LINE	PROJECT/JOB NO REPORTING CATEGORY				COMMODITY CODE	
DATE						01						
						02						