HEERF CLAIM REIMBURSEMENT REQUEST FORM GUIDE
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Step by step guide on how to complete the HEERF Claim Reimbursement form.

Please complete all necessary fields on the PDF form.

I. Section one

The document should be saved using the following naming convention: applicable division, department, proposal # and claim amount. Example: AA_CAL_#4_$23,677

Date Submitted: Date you are submitting the form.

Submitted by: Name of the person submitting the form.

Extension: Extension of the person submitting the form.

Division: Select the division the claim is for.

Dept/College: Name the department or college the claim is for.

Proposal Number: Provide the proposal number. If you don't know, please contact your division analyst.

Type of claim: Select if the claim is for expenses or lost revenues.

- Lost Revenue – revenues a department/college expected but were reduced/eliminated because of COVID-19 pandemic. Lost revenues can only be estimated.
- Expense – eligible expenditures according to the division proposals that have already occurred.

II. Use/Rationale

Expenses: Please describe the intended use of the HEERF Funding as provided by the requesting division/department. Please explain the rationale of the expenditure(s) and justification of how they are associated with or caused by Coronavirus pandemic.

Lost Revenues: Please describe the intended use of the HEERF Funding as provided by the requesting division/department. Please explain the rationale of the expenditure(s) AND lost revenues calculations/methodology, justification of how they are associated with or caused by Coronavirus pandemic.

*You may add an additional attachment if more room is needed.

III. Costs

Enter reimbursement costs incurred relevant to the claim. Please note that the reimbursement for the expense requires a journal entry to process; therefore, chartfield information for the debit and credit is necessary.   For most cases, the information will be the same for both. However, some departments may have different chartfield information. In either case, the amounts section should match for both the debit and credit.

Section A – Lost Revenue

This section is to be completed for lost revenue claims only.

- **Estimated Amount** – Enter the estimated amount of the lost revenue based on your calculation/methodology.
- **Revenue Chartfield** – Enter the chartfield information for the revenue account.

Section B – Expense Chartfield Information

This section is to be completed for expense claims only.

- **Expense Posted To (Debit):** Provide the complete chartfield string and amount of where the original expense posted to.

- **Expense Reimbursed To (Credit):** Provide the complete chartfield string and amount of where the expense should be reimbursed to.

*You may add an additional attachment if more room is needed.

IV. Documentation

Depending on the type of request you are submitting, the documentation required may differ.

Required for Operating Expenses

- Data Warehouse (DW) Detail Report - DW detail report will demonstrate the expenses posted to the department/college.
- Purchase Order (PO) – PO for the expense(s).
- Invoice – Invoice(s) for the expense(s).

Required for Payroll/Salary Expenses

- Data Warehouse (DW) Detail Report – DW detail report will demonstrate the expenses posted to the department/college.
- Payroll Detail Report - Payroll detail report will include the breakdown of the salary and benefits.

Required for Lost Revenues

- Data Warehouse (DW) Financial Summary by Year - A comparison with a baseline year of a fiscal year prior to the March 13, 2020 national emergency declaration, such as the fiscal year from July 1, 2018 – June 30, 2019
- Calculation/Methodology/Projections – supporting documentation of your calculations including methodology and/or projections. Although there are various methods of calculating the estimated amount of lost revenue, please be consistent with the method you choose for all years. For additional information and examples for lost revenues please visit: https://www2.ed.gov/about/offices/list/ope/heerflostrevenuefaqs.pdf

Other (Optional)

Indicate any additional documents you have provided with your claim **besides** the required information.

V. Submittal Process

Complete the HEERF Claim Reimbursement Request form and submit with the additional supporting documentation to heerfclaims@csusb.edu. Please note each division has a specific process on how they are tracking and submitting the claims. Please contact your division analyst for additional information.

For additional information on guidelines and procedures please visit the 'HEERF Claim' section at the following link: Procedures and Forms | Financial Services | CSUSB

For any additional questions please contact Marlene Ambriz x77195 or e-mail heerfclaims@csusb.edu