Human Services, INC.



Contact Information

850-891-7173
humanservices@talgov.com
300 S. Adams Street
Tallahassee, FL 32301

November 28, 2023

Dear Human Services Staff:

Please accept this letter as an official request for reimbursement. These costs were incurred for our program Community Partnership. The amount requested is \$4,834.00 and represents expenses for October 1 – October 31, 2023. Enclosed you will find all required reports and documents.

Sincerely,

Sally Jones

Executive Director

Human Services Inc.

850-891-7173 sjones@hs.org All Cover letters must be on Agency letterhead and must include date, address, amount requested for payment, dates for the amount requested, and signature.

SAMPLE REIMBURSEMENT REQUEST

FY 2023/24 REPORT OF EXPENDITURES AND REIMBURSEMENT REQUEST

General Revenue

Please complete only the areas highlighted in blue

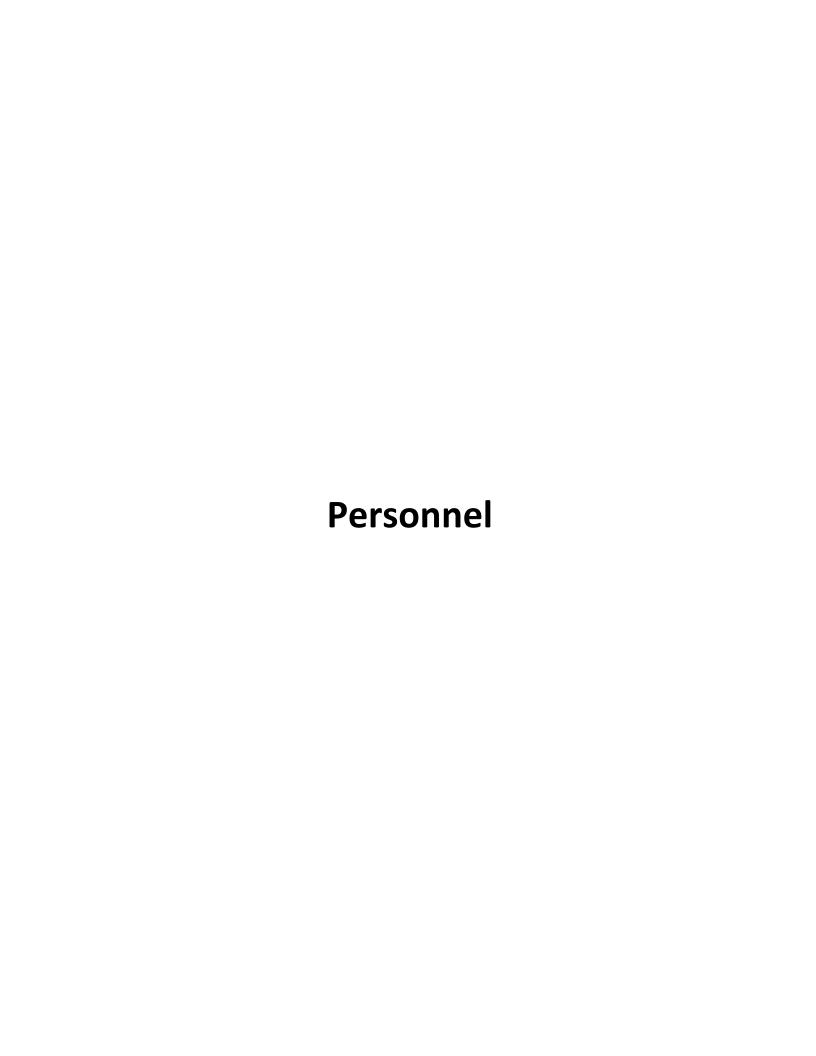
FUNDING SOURCE (Select from the drop-down list)

AGENCY NAME:	Human Services, Inc.	PROGRAM NAME:	Community Partnership	REPORTING PERIOD COVERED:	October 1-31, 2023
CURRENT EXPENDITURES:	\$4,834.00	CUMULATIVE	\$4,834.00	AMOUNT OF PAYMENT	\$4,834.00

Cost Category	Project Budget		Current Expenditures \$				Cumulative Expenditures (Amount	Unexpended Budget							
Cool onlegely	\$	Payment 1	Payment 2	Payment 3	Payment 4	Payment 5	Payment 6	Payment 7	Payment 8	Payment 9	Payment 10	Payment 11	Payment 12	Spent To- Date) \$	(Remaining Funds) \$
1.Personnel	\$10,000.00	\$1,000.00												\$1,000.00	\$9,000.00
2.Professional Fees	\$1,500.00	\$200.00												\$200.00	\$1,300.00
3.Occupancy/Utilities/Phones/ Networks	\$2,000.00	\$200.00												\$200.00	\$1,800.00
4.Materials/Supplies/Postage	\$500.00	\$144.00												\$144.00	\$356.00
5.Equipment Rental, Maintenance, Purchase	\$500.00	\$55.00												\$55.00	\$445.00
6.Travel/Workshops/Training	\$500.00	\$75.00												\$75.00	\$425.00
7.Business Incorporation Services	\$150.00	\$75.00												\$75.00	\$75.00
8.Direct Client Assistance	\$3,000.00	\$225.00												\$225.00	\$2,775.00
9.Insurance (e.g., Bonding, Liability)	\$350.00	\$125.00												\$125.00	\$225.00
10.Collaborative Partnership Activities	\$2,000.00	\$1,535.00												\$1,535.00	\$465.00
11.Capacity Building (e.g., UPHS, INIE)	\$150.00	\$150.00												\$150.00	\$0.00
12.Copying/Printing	\$200.00	\$50.00												\$50.00	\$150.00
13.Other/Specify: Annual database subscription	\$1,000.00	\$1,000.00												\$1,000.00	\$0.00
TOTALS	\$21,850.00	\$4,834.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,834.00	\$17,016.00

October Reimbursement Detail

Personnel Sara Allen salary	\$1,000.00
Professional Fees Eburd, Inc bookkeeping Blackout IT - computer set up	\$100.00 \$100.00
Occupancy Monthy rent- October	\$200.00
Materials/Supplies/Postage Office Supply Depot-planners WalMart- Office supplies	\$100.00 \$44.00
Equipment Rental Office Printer Shop- copier rental	\$55.00
Travel/Workshops/Training Conference registration- Sara Allen	\$75.00
Business Incorporation Services Div. of Consumer Services- Biz. Registration	\$75.00
Direct Client Assistance Polk Comm. College- tuition and books for client	\$225.00
Insurance Liability insurance	\$125.00
Collaborative Partnership Activities Collab. Community events costs	\$1,535.00
Capacity Building We Got You Inc. membership	\$150.00
Copying/Printing Flyer printing	\$50.00
Other: Annual database subscription HS Database software annual subscription	\$1,000.00
TOTAL	\$4,834.00



ABC PAYROLL COMPANY

Pay date: 10.16.23

Human Services. Inc. 300 S Adams St. Tallahassee, FL 32301

Employee Name: Sara Allen Pay Period: 10.1.23-10.15.23

CASE MANAGER

80 hours \$20/hour Total: \$1600

Employer paid payroll taxes: Social Security: 6.2% = \$99.20 Medicare: 1.45% = \$24.64

Total: \$123.84

Only claiming \$1000.00 of this amount



INVOICE



INVOICE NUMBER 0000420

DATE OF ISSUE 10/15/2023

BILLED TO Human Services, Inc 300 S Adams St. Tallahassee, Fl. 32301

EBurd Inc.,

829 Jen. Avenue Tallahassee, Fl., 32303 850 420 – EEBI Eburd@EEBI.com EarnestEBurden.com

DESCRIPTION	UNIT COST	QTY/HR RATE	AMOUNT
Oct. Bookkeeping	\$25	4	\$100

INVOICE TOTAL \$100

\$100 piscount \$0

(TAX RATE) 0%

TAX \$0

TOTAL \$100

TERMS

E.g., Please pay the invoice by 10/30/2023



INVOICE

DATE: 10/12/2023

INVOICE # 536

CUSTOMER ID: HSI 1463

TO:

Human Services, Inc. 300 S Adams Street Tallahassee, Florida 32301 850 891 0000

SALESPERSON	JOB	PAYMENT TERMS	DUE DATE
Steve Black	IT	Due on receipt	10/30/23

QTY	DESCRIPTION	UNIT PRICE	LINE TOTAL
1	Computer workstation setup and installation	100	100
		SUBTOTAL	100
		SALES TAX	0
		TOTAL	100

MAKE ALL CHECKS PAYABLE TO BLACKOUT INC.

Thank you for your business!

BLACKOUT IT & NETWORK 420 BURDEN LANE | TALLAHASSEE, FL | PHONE: 850 850 111- 1300 | WWW.BLACKOUTITNET.COM



LIVING IN FAITH INVOICE LIVING IN FAITH

"A DREAM DOESN'T BECOME REALITY THROUGH MAGIC; IT TAKES SWEAT, DETERMINATION AND HARD WORK."

TO:

DATE:		
October	1,	2023

INVOICE # 001999

CUSTOMER ID: 30324

DUE DATE: October 5, 2023

Contact Person: William Francis

Phone number: 800-566-3582
Email: wfrancis.livinginfaith@gmail.com

DESCRIPTION OF SERVICES

AMOUNT DUE

Human Services 300 S. Adams Street City of Tallahassee

Tallahassee, Florida 32301

Monthly Office Rent, October	1000.00
TOTAL	1000.00

MAKE ALL CHECKS PAYABLE TO LIVING IN FAITH

Thank you for your business!

1212 NEWBURG COURT | TALLAHASSEE, FLORIDA 32301 | PHONE: 800-566-3581 | LIVINGINFAITH@GMAIL.COM

Requesting reimbursement for \$200 of this expense



Materials/Supplies/Postage

INVOICE OFFICE SUPPLY DEPOT

DATE: 10/15/2023

INVOICE #

330

CUSTOMER ID: ABC12345

REQUESTING REIMBURSEMENT FOR 25 CALENDARS/ PLANNERS FOR \$100 (25X4=100)

QTY	DESCRIPTION	UNIT PRICE	LINE TOTAL
30	Calendars and Planners	4.00	120
		SUBTOTAL	120.00
		SALES TAX	6.00
		TOTAL	126.00

OFFICE DEPOT 123 MAIN ST. | TALLAHASSEE, FL | PHONE: 111-222-3333 | FAX: 111-222-3334

Note: Sales tax cannot be reimbursed



Give us feedback

Thank you! ID #: 79DSFXCWFGH2384B

Walmart > '<

1800 Walmart Street, Tallahassee, FL 32301

ST# 8953 OP#	26053693	TE#	66	TR# 77000
20 Disposable Face Masks	07347409	4209		5.00
First Aid Kits	02627020	3444		8.75
Trail Mix	03074020	5157	F	4.25
Paper Plates	06098816	7964		3.25
Printer Paper	06254688	7025		15.50
Printer Ink	09249904	2963		10.50
Coffee Filters	05323625	8108		2.25
Scissors	08105248	6930		4.25
Inspirational Wall Quotes	06613911	6419		5.00
Board Game	06385569	2164		6.50
Board Game	06385569	216 4		6.50
		SUBTOTAL	<u>_</u>	71.75
TAX	<	7.50%		5.38
		Total	_	77.13
		BIT TENI		77.13
	CI	Hange Due		0.00

ACCOUNT # **** *** 5553 APPROVAL # 643091

REF # 252453829078 TERMINAL # 3960513997

ITEMS SOLD 11

TC# 4410 6921 3983 0757 0000



Thank You for Shopping With Us! 10/09/2023 08:32 ★★★ CUSTOMER COPY ★★★ Requesting \$44.00

Equipment Rental, Maintenance, Purchase



INVOICE

INVOICE ID: 11100

Invoice Date: October 1, 2023

SENDER

Office Printer Shap 5555 Tallahassee St Tallahassee, FL 32301 +1 555 850 5555

RECIPIENT

Human Services Inc. 300 S Adams Street Tallahassee FL 32301 +1 850 555 5555

MONTHLY RENTAL DETAILS

Item No	Product Name	Seiler ID	Company ID	Price
1	Copier monthly rental	OFCPRNTPPSHP	OPPS5676543- 458899	\$55.00

Membership ID: HS-TFL-78975418999

PAYMENT TERMS:

Payment via monthly credit card subscription.

I certify that all information above is accurate to my knowledge.

Paprika McPaperton CEO





Your event registration has been completed. Thank you for registering!

Annual UFHS Conference for Learning More About Human Services

When: October 18, 2023 8:00 AM, EDT

Where: TSU Dogwood Auditorium - 2nd Floor

EVENT DETAILS:



UFHS Early Bird Pricing ends on July 31st:

Registration Type	Early Bird Pricing	Regular Pricing
	Through October 1st, 2023	October 2nd – October 17th
UFHS Member	\$75.00 per person	\$115.00 per person
Non-Member	\$115.00 per person	\$175.00 per person

ADDITIONAL INFORMATION:

YOUR REGISTRATION DETAILS:

Organization Name: Human Services Inc.

Member First name: Sara Member Last name: Allen

Member Email: Staff@humanservicesinc.com

Member Phone: 555-555-555

Organization Address: 300 S. Adams Street

Tallahassee, FL 32301

Organization City: Tallahassee

Organization State: FL

Organization Zip Code: 32301

Organization Phone - General: (850) 555-5555

Organization Contact - General: Dr. Human Services Director

Organization Website: https://www.talgov.com Organization Service Area(s): Human Services

Night/Weekend Services Available: No

To review your registration details, go to your <u>registration details page</u>.

Check-in for the Event



Please print this email or display this code on your mobile device to check into the event.

Best regards,

United Friends for Human Services



AGENDA

2023 Learning More About Human Services Conference Schedule

Tallahassee, Florida

Wednesday, October 18, 2023

8:00 am - 4:00 pm	Open Registration
8:00 am - 5:00 pm	Exhibition Hall Open – (Workshop Sessions)
8:30 am - 10:00 am	Welcome Breakfast and Networking Mixer – (Exhibition Hall)
10:30 am - 12:00 pm	Session 1A – <u>Getting to Know Your Local Human Services Agencies</u> – Local Agency Introductions – (Main Room)
11:30 am - 12:30 pm	Session 1B – What Don't I Know About Human Services? Hosted by Dr. Human Services Director – (Banquet Hall)
12:30 pm - 1:30 pm	Session 2 – Keynote Speech & Lunch – <u>Learning More About Human</u> <u>Services</u> Presented by Dr. Speaks A Lot Because She Knows A Lot – (Banquet Hall)
1:30 pm - 3:00 pm	Session 3 – <u>Connecting All the Human Services Dots</u> – (Workshop sessions presented by Human Services Professionals) – (Main Room)
2:30 pm - 4:30 pm	Session 4 – <u>Mastering Human Services</u> – (Workshop sessions presented by Local Agencies) – (Exhibition Hall)
4:30 pm - 5:00 pm	Session 5 – <u>Lessons in Retaining Everything</u> – Closing Remarks – (Banquet Hall)

RECEIPT

RECEIPT FROM

United Friends for Human Services

Date: October 1 2023

AMOUNT PAID

Amount Paid: \$75

PAYMENT INFORMATION

Paid by: Dr. Human Services Director

Amount Paid: \$75

For Payment of: Annual Workshop

Authorized Signature _

By Dr. Human Services Director



Your application has been received and items have been paid for. Applications will be processed in the order they are received.

Transaction Details: Payment Date:10/1/23

Payment Type:
Account Last Four:
Amount: \$75.00

Convenience Fees: \$1.88

Receipt of Payment

DTN	Name	Fee	
XXXXXXX	XXXXXXXX	\$75.00	
	Convenience Fees	\$1.88	
-		Total:\$76.88	

Requesting a \$75 reimbursement.

Mailing Address:

FDACS

Division of Consumer Services 2005 APALACHEE PKWY TALLAHASSEE FL 32399-6500

Fax Number: 850-410-3804

Phone Number: 1-800-HELP-FLA (435-7352) from Florida, 850-410-3800 outside Florida

Print Confirmation



INVOICE

DATE

October 1 2023

INVOICE NO

0100

2525 Wilson Drive

Tallahassee, Florida 32301

850-222-6120

Fax: 850-222-6121

msmith@polkcommunitycollege.com

Polk Community College

Due Date

October 15, 2023

TO: Human Services

300 S. Adams Street Tallahassee, FL 32304

humanservices@yahoo.com

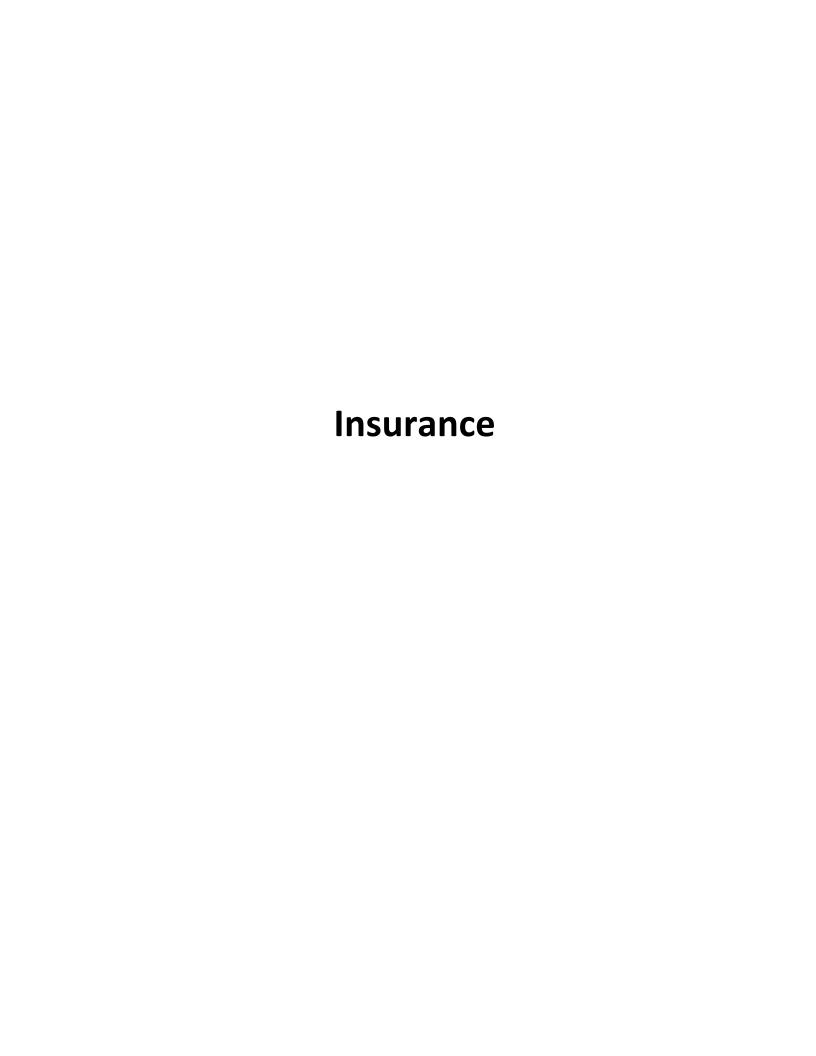
For Student: Sam Smith Student ID: 3138568

QUANTITY	DESCRIPTION	UNIT PRICE	LINE TOTAL
1	Tuition	\$200.00	\$200.00
1	Bus Pass	\$17.00	\$17.00
1	Text book	\$25.00	\$25.00
1	Meal Plan	\$33.00	\$33.00

Requesting reimbursement for \$225 of this total

Subtotal	\$275.00
Sales Tax	0.00
Total	\$275.00

[&]quot;Continuous learning is the minimum requirement for success in any field."



PHILADELPHIA INSURANCE COMPANIES 123 Main Street Philadelphia, PA 55555 555-555-5555

Date: 10/1/23

Account Number 833362223211

Due date 10/15/23

Your account summary

Current month breakdown

Product	Policy	Term/ Bill Plan	Premium Charges	Premium applied	Current Installment Amount	Sales Tax/ Surcharge	Fees	Payment/Credits	Current Balance	
89911101110	Human Services Inc									
Non-Profit Liability Insurance Package	PKOKSJJJJ7778522	10/01/22- 23 Monthly	150.00	0.00	150.00 1 of 1	0.00	0.00	0.00	<mark>150.00</mark>	
	PKOKSJJJJ7778522		8.00	0.00	0.00	8.00	0.00	0.00	8.00	Note: sales tax cannot be
	Amount due 10/15/23		158.00	0.00	150.00	8.00	0.00	0.00	158.00	reimbursed

Requesting reimbursement for \$125.00



Collaborative Partnership Activities

10.6.2023 **Invoice No. 01**

To

Human Services, Inc.

300 S. Adams Street Tallahassee, FL 32301

Remit To Helping The Community Do The Thing, LLC

Attn: Jane Doe 45 Progress Blvd Tallahassee, FL 32310

Collaborative Event:

Community Driver's License Restoration Event between Human Services, Inc., Law Enforcement and Courts

Quantity	Description	Unit Price	Total
5-Hours	Event Marketing: Radio, social media, Video Production, Flyer Design and Production.	\$100/Hour	\$500.00
5,000	Event flyers for the Driver's License Restoration Project with Law Enforcement and Courts	\$0.10/each	\$500.00
35	Basic Driver's License Restoration (Leon County Court Filing Fee's)	\$27/each	\$945.00
50	Birth Certification Assistance (required for Drivers License Application)	\$5/each	\$250.00
4	Revoked Driver's License Assistance	\$85/each	\$340.00
97	Voting Registration	\$0/each	\$0.00
10,000	Event Swag: Tumblers, Coffee Mugs, Hats, Utensils, Magnets, Tote Bags, Calendars, Logo Snacks and Water Bottles.	\$0.50/each	\$5,000.00
1	Shipping Fee for Event Swag	-	\$20.00
	Subtotal		\$7,535
	Sales Tax		\$0.00
	Shipping & Handling		\$20.00
	Total Due		\$7,555.00

Requesting a \$1,535 reimbursement

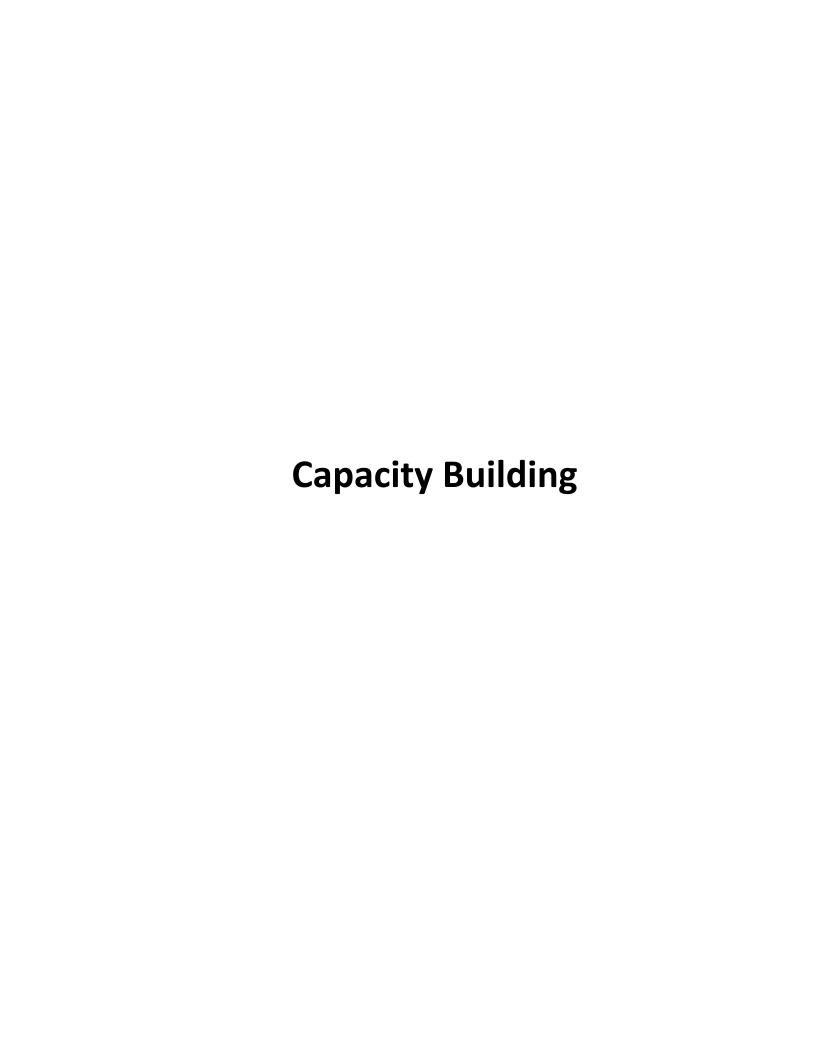
Due upon receipt Thank you for your business!

Helping The Community Do The Thing, LLC

Tel (850) 850-8500

45 Progress Blvd Tallahassee, FL 32310 HelpingTheCommunityDoTh eThing@example.com





WE GOT YOU, INC.



MEMBERSHIP RECEIPT SOLD TO

Human Services, Inc. 300 S. Adams Street Tallahassee, FL 32301 (850) 891-6566 DATE

10.20.2023

RECEIPT #

100

ID NO.

COT HS

CHECK NO. PAYMENT METHOD JOB

N/A Credit Capacity Building Membership Dues

DESCRIPTION	UNIT PRICE	DISCOUNT	LINE TOTAL			
One-Year Renewal Rate	\$200	\$50	\$150			
To include, but not limited to	:					
Board of Directors Training						
By Laws Structuring						
DEI Training for Operational	Staff					
Unlimited Access to Local N	Unlimited Access to Local Non-Profit Workshops					
Audit Training						
Business Incorporation Filing	Assistance					
Structure and Operational Review						
Grant Writing Assistance						
Grant Reimbursement Trainir	Grant Reimbursement Training					

TOTAL DISCOUNT	\$50	\$150
SUBTOTAL		\$150
SALES TAX		\$0.00
TOTAL		\$150

THANK YOU FOR YOUR BUSINESS!

We Got You, Inc.

wegotyou@example.com

8910 Capacity Building Ave.

P (850) 404-1111

Tallahassee, FL 32309

Requesting a \$150 reimbursement

Copying/Printing

CopyRight Printing Express 0119 Ean Lane 850 116 -1986 Copyrightprintingexpress.com



Receipt of Sale	

Salesperson: Jennifer Vander		Date: 10/19/2023		
Customer: Human Services Inc,		Phone: 850 891-0000		
Address: 300 S Adams Street				
City: Tallahassee	State: FL	Zip: 32301		

Item #	Quantity	Description	Unit Price	Discount	Line Total
7542	100	Full-Color Flyers	\$0.50		\$50.00
Total Discount					
				Subtotal	\$50.00
				Sales Tax	\$3.75
				Total	\$53.75

Payment Met Cash Credit Care	X Check (Check Number:)Acco	ount (#:)
Type:	Number:	Exp. Date:	
Sally Smith Buyer	Date	Jenn V. Seller	Requesting a \$50.00 reimbursement

Other: Annual Database Subscription



1234 Database Road Orlando, FL 32801 Phone :580-516-5369

Website: www.HSDSFT.com

Dear Customer,

Thank you for subscribing to Human Services Database Software. Your subscription information has been added below.

If you did not initiate this subscription, please reach out to us at support@HSDSFT.com

SUMMARY

DATE October 1, 2023

PAYMENT MODE Credit Card

SUBSCRIPTION TYPE	PRICE/MONTH	PAID	VALIDITY
Premium	\$83.33*	\$1,000.00	10/01/23-09/30/24

Your subscription will be auto-renewed before the expiry date. However, if you wish to discontinue, please remove your billing information by logging in to your account.

Visit our FAQs page to know more about different subscription levels.

*The charge for the first month is \$83.37 to account for full total.













Bankers Bank 12 Main Street Tallahassee, FL 32301 Bankersbank@domain.com

STATEMENT OF ACCOUNT

111-234-567-890 Account Number:

Statement Date: 11/1/2023 Page 1 of 1

Period Covered: 10/1/2023-10/31/2023

Human Services, Inc. 175,800.00 Opening Balance: 300 S Adams St Total Credit Amount: 200,000.00 Tallahassee, FL 32301 Total Debit Amount: 34,165.13 Closing Balance: 341,634.87 Downtown branch

Account Type: Current Account

8 Number of Transactions:

Transactions

Date	Description	Credit	Debit	Balance
10/8/2023	Check #199- Helping the Community		7,555.00	168,245.00
10/9/2023	Debit- WalMart		77.13	168,167.87
10/16/2023	Big federal grant payment	200,000.00		368,167.87
10/16/2023	Payment - Insurance		158.00	368,009.87
10/16/2023	Debit - ABC Payroll Company		25,000.00	343,009.87
10/17/2023	Check #201- Eburd, Inc.		100.00	342,909.87
10/17/2023	Check #202- Living In Faith		1,000.00	341,909.87
10/18/2023	Check # 200 Polk CC		275.00	341,634.87
	End of Transactions			

XYZ CREDIT CARD COMPANY STATEMENT



Credit Card information

Customer Number
Card Number
Card Limit
Statement Date
Amount

12302139 112321***3 1500

November 01, 2023 \$1,872.20 Payment due on: November 15, 2023

Human Services Inc. 300 S Adams Street

Tallahassee, FL 32301

Date Description	Amount
OCT 1 2023 07:12 Publix	\$150.23
OCT 1 2023 17:55 Pizza, Pizza, Pizza	\$87.22
OCT 1 2023 09:22 FL DACS	\$75.00
OCT 1 2023 18:12 UFHS	\$75.00
OCT 4 023 21:12 Human Services Database	\$1,000.00
OCT 5 2023 12:54 Office Printer Shop 10 OCT 17, 2023 08:10 Blackout IT & Network	\$55.00
OCT 17 2023 19:01 We Got You, INC.	\$1 <mark>00.00</mark>
OCT 17 2023 08:11 Office Supplies Depot	\$150.00
	\$126.00
OCT 20 2023 07:40 CopyRight Express	\$53.75

Store TOTAL AMOUNT \$1,872.20