

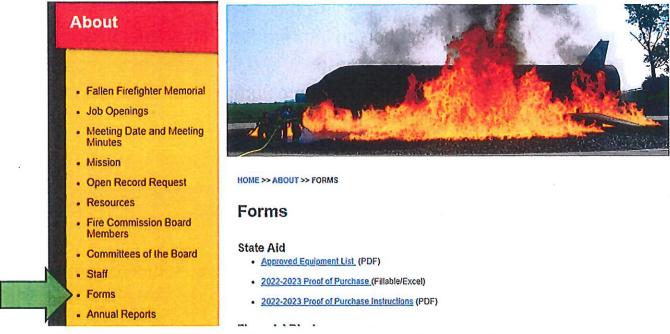
(800) 782-6823 kyfirecommission.kctcs.edu

How to submit a Proof of Purchase Form

- Go to the Kentucky Fire Commission website.
 https://kyfirecommission.kctcs.edu/
- Click About



On the left column, click on Forms



Under State Aid, select Proof of Purchase (Fillable/Excel)



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Step 1 – Information



2023-2024 PROOF OF PURCHASE



	The second secon	FIRE DEPARTMENT INFORMATION	and the same of the	
Department Number	Department N	anie	County	Federal ID Number
	Contact Person	Phone Number		Email
				*

- Input the Fire Department Number (three (3) or four (4) numbers), Department Name, County and Federal ID Number (xx-xxxxxxx).
- Input the contact person information. This should be someone
 who can answer any questions and has access to invoices, bank
 information, etc. List the phone number and email of the
 contact person.

Step 2 – Personnel

HOW MANY PERSONNEL?					
Volunteers	Part-time	Career/Professional	Total on roster (NO JUNOIRS OR DEPARTMENT EMAPLOYEES)		
			0		

- The number of personnel listed shall only include volunteers, part-time, and career/professionals. Junior firefighters and department employees are not to be counted.
- The total on the roster will automatically calculate based on the number you put in the other three categories.



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Step 3 – Loans (all loans related to fire department debt)

LOANS (ALL LOANS RELATED TO FIRE DEPARTMENT DEBT)						
Bank or Lendor	Account Number	What is the loan for?	Payment Amount	Payment Schedule (Monthly, Quarterly, Annually)	Start Date	Eud Da

• Input loan information in this section (even if it is not being used for State Aid).

Step 4 – Expenditures

			EXPENDITURES			
ces must be for ite	nis purchased from July 1, 2023	to June 30,2024. Forms must be	returned by JULY 31, 2024. <u>All related invoices and bank st</u> through email: fdstateaid@kctcs.edu	tatements shall be kept for compliance i	uspection purposes at the fire o	lepartment.Submit all for
			VENDOR NAME	PURPOSE AND ACCOUNT NUMBER	TYPE OF PAYMENT	TOTAL EXPENSE STATE- WILL COVER
Iusurance	Station and apparatus up to \$5,000					
Utilities	Electric, water and heating gas up to \$4,000					
Iuternet	Up to \$1,200 (does not include phone)					
		Marie Carl	VENDOR NAME	PURPOSE AND ACCOUNT NUMBER	Type of Payment	TOTAL EXPENSE
Loans	Fire Commission loan or department loan					
Loans	Fire Commission loan or department loan					
Saving	Must be in a savings account, no partial savings and send bank statement					(1)
		1			CHECK, CREDIT CARD # AND	
VE	VENDOR NAME INVOICE		DESCRIPTION OF ITEMS PURCHASED		DATE, OR TRANSACTION NUMBER	TOTAL EXPENSE

 Detail the information on how the department spent money and what is being used for State Aid.



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- If the department uses State Aid for insurance, utilities and/or internet payments, it is required to note vendor name, purpose, account number, type of payment, and total expense State Aid will cover.
- If the department is using State Aid toward a loan payment or saving State Aid money for future use, the next section will need to be completed.
 - o If using monies toward a loan, make sure the loan section in Step 3 has been completed. Then input the information into this section. Provide the vendor's name, purpose, account number, type of payment, and total expense that State Aid will cover.
 - o If the department is saving their State Aid money for future use, input the name of the bank where the account is being held, purpose, account number, type of payment (this will be auto transfer, direct deposit, or check), and the total amount that you saved for that year.
 - When sending your proof of purchase form, you will also need to send a bank statement showing the name of the account and the balance.
- If the department is using State Aid to purchase items, the department will need to complete all rows necessary to cover the entire State Aid allotment. Input the vendor name, invoice number(s), description of the item (cannot be "maintenance" – must be a description of the type of maintenance such as "repair of breathing apparatus masks"), check #/credit card or transaction number, date, and total expense State Aid will cover.



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 At the bottom, total expenses will automatically be calculated based on the numbers put in these sections.

Step 5 - Signature

I, the undersigned, attest to the fact that the information in this document is accurate and correct.

Signature of Authorized Certifying Official

Date

 Type your signature and date to verify the information provided is accurate and correct.

Step 6 - Submit

 Save the document to your computer. Then send an email to fdstateaid@kctcs.edu with the proof of purchase form attached.

Once the State Aid office receives the proof of purchase form through email, they will send an email verifying the information has been received. If additional information is needed, or there are questions, the State Aid office will respond to the email.

If you do not receive an email within two business days verifying the State Aid office received the proof of purchase form, please contact the State Aid office by phone (859) 256-3787.