Request for Budget Surplus Payment Form

Participant Name	Participant ID #
Employer Name	

Payment Instructions

Make Check Payable To:			
Name	Is this payment to an Employee?		
Address	City/State/Zip		

Enter information on the appropriate line below for payment from the Budget Surplus Balance.

- Budget Surplus Balance Mileage, write in total miles X rate in the Description.
- Budget Surplus Balance Bonus, write in the gross amount of the payment. Taxes will come out of this amount. Service date should be within pay period of pay cycle in which you wish to pay your Employee.
- Budget Surplus Balance Training, use this code for Training/Supervision hours. Enter the number of hours and rate of pay in the Description.

Service Date	Service Code	Description	Total Amount
	BSBS-Mileage		
	BSBS-Bonus		
	BSBS-Training		
		Total Check Amount	
		Invoice Number (if applicable)	

Return this form to Acumen by email to payroll-nc@acumen2.net

REMINDER: Please be sure to check the amount remaining in your Budget Surplus allotment. Acumen cannot pay more than is remaining.

By signing this form, I attest that services were delivered and received consistent with the Individualized Support Plan and I have rendered and/or approved the above payment request in accordance with the Program regulations. I understand that payment and satisfaction of this claim may be from Federal and State funds, and that I may be prosecuted under applicable Federal or State laws, for any false claims, statements or documents or concealment of a material fact. Any misuse of funds may result in being fined or penalized including but not limited to the repayment of claim. Collection costs or legal fees will be my responsibility.

EOR Signature

Date

Information on how to return completed form to Acumen by fax, mail or email is listed below.

Acumen Fiscal Agent, LLC 5416 E. Baseline Rd., Suite 200 Mesa, AZ 85206 Phone (866) 811-3099 Fax (855) 264-3292 Payroll-nc@acumen2.net