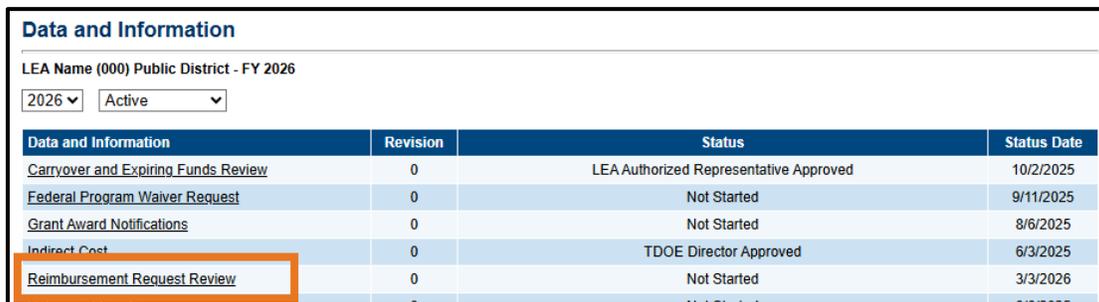# Reimbursement Request Review
Instructions for LEAs and Subrecipients

Local educational agencies (LEAs) or subrecipients will be selected to complete a Reimbursement Request Review periodically throughout the fiscal year based on the Results-Based Monitoring Risk Analysis and any risk identified through Monitoring Results. When chosen, LEAs or subrecipients receive notification from the department via ePlan bulk email.

LEAs or subrecipients are given **10 business days** to locate, upload, and confirm that documentation is correct and final. LEAs or subrecipients answer a short Yes/No question about each identified reimbursement request and submit it to the department for review by following the workflow, which requires review by the fiscal representative and authorized representative (director of schools).

Follow these steps to access the Reimbursement Request Review:

1. Log in to ePlan.tn.gov and select **Data and Information** from the left navigation menu. On the Data and Information screen, select the **current fiscal year** and the **Active** state from the drop down. Then, in the table, click the link for the **Reimbursement Request Review** instrument.

2. Once the Reimbursement Request Review has opened, click **Draft Started** to begin the Reimbursement Request Review process. Click confirm to change the status.

3. From the sections page, select the Instructions page link to open the Instructions page. Read the instructions carefully.

3. LEAs may be selected for up to five (5) reimbursement request reviews. Each numbered page will identify one reimbursement request selected for review. LEAs may have pages visible with no reimbursement request identified on the page. LEAs only need to provide information on pages

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where a reimbursement request selection is identified. Pages with remaining actions required will contain a *Messages* link in the validation column on the sections page.

Description (View Sections Only View All Pages)	Validation	Print Select Items
All	Messages	Print
⊟ History Log		Print
History Log		Print
Create Comment		
⊟ Reimbursement Request Review	Messages	Print
Instructions		Print
Reimbursement Request 1	Messages	Print
Reimbursement Request 2		Print
Reimbursement Request 3		Print
Reimbursement Request 4		Print
Reimbursement Request 5		Print
Related Documents	Messages	Print

4. On each active Reimbursement Request page, the check box at the top of the page is preselected to activate the page. The selected Reimbursement Request is identified by Grant Name, Fiscal Year, Date (the payment date recorded in ePlan), the voucher ID, the Account and Line Items identified for review, and the total amount of the lines identified for review. LEAs are also provided with the reviewer's email address for questions and additional support.

Grant Name	CFA Title III-ELL
Fiscal Year	2026
Date	7/1/2025
Voucher	[Voucher ID]
Account/Line	72130 - 189
Amount	$100.00
Reviewer	[Reviewer.Name@tn.gov]

5. Under Documents, click the **Reconciliation Summary (Table of Contents)** template link to download the provided template.

Required and/or Optional Uploads - Please upload all items relevant to the identified reimbursement request.

Type	Document Template	Document/Link
(RRR1) Reconciliation Summary (Table of Contents) [Upload at least 1 document(s)]	(RRR1) Reconciliation Summary (Table of Contents)	Upload New
(RRR1) Invoice(s) [Upload at least 1 document(s)]	N/A	Upload New
(RRR1) Payroll Ledger(s)	N/A	Upload New
(RRR1) Packing Slip(s)	N/A	Upload New
(RRR1) Receipt(s)	N/A	Upload New
(RRR1) Purchase Order(s)	N/A	Upload New
(RRR1) Requisition(s)	N/A	Upload New
(RRR1) Davis-Bacon Act Compliance (Contracts, Wage Sheets, etc.)	N/A	Upload New

6. Gather the supporting documentation for the identified voucher for the identified Account and Line-Items, then complete the template. Upload the template and all supporting documentation by document type. To ensure that ePlan can upload the selected documents, convert the documents into pdf files, and save files of fewer than 30 sheets. Upload documents by clicking **Upload New** and

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following the prompts. Rename documents to match the Document Name listed in the Reconciliation Summary Template. Please include the LEA Name and number in all document names

LEA Number					
LEA Name					
Voucher#					
Request Period					
Federal Grant					
Total Amount Requested		If amount requested does not match supporting documentation to the penny, please explain.			
LEA to Complete This Section (All fields are required except Optional Notes.)					
Account Code(s)	**Line Item(s)**	**$ Amount**	**Document Name**	**Page Number(s)**	**Optional Notes***
	Documentation Total	$ -	If the documentation amount does not match the total amount requested, plea		
	Variance	$ -			

7. Complete the required short-answer questions about the documentation provided.

Required and/or Optional Uploads - Please upload all items relevant to the identified reimbursement request.

Short Answer Questions - Answer about the reimbursement request identified above.
* The LEA was able to provide a reconciliation (above) that matched the total of the reimbursement request (to the penny).
Select... ⌄
* The LEA included all expenditures in the reimbursement request identified above in the appropriate funding application.
Select... ⌄
* To the best of your knowledge, have all of the items in this reimbursement request been reviewed and determined as reasonable, necessary, and allocable?
Select... ⌄

8. Follow the steps above to complete all active pages.

9. When all active pages are complete, return to the sections page and change the status to **Draft Completed**.

Status: Draft Started

Change Status To: Draft Completed

10. The *LEA Fiscal Representative* must review and then change the status to *LEA Fiscal Representative Reviewed*.

11. To submit the review to the department, the *LEA Authorized Representative* must review and then change the status to *LEA Authorized Representative Reviewed*.

12. Department staff will review the information provided, record any feedback or follow-up questions in the checklist, notify the LEA, and return the instrument to the LEA by changing the status to TDOE

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Reimbursement Request Review Director Returned Not Approved. LEAs must provide additional information and then resubmit the instrument.

Reimbursement Request Checklist

LEA Name (000) Public District - FY 2026 - Reimbursement Request Review - Rev 0

Go To ▶

	General Checklist Comment		
	No comments have been made at this time		

Checklist Description (Collapse All   Expand All)

⊟	1. Reimbursement Request Match	OK ⌄	Reviewer Name	2/12/2026 5:40:29 PM
	1.01 Matched			
⊟	2. Reimbursement Request Appropriate	OK ⌄	Reviewer Name	2/12/2026 5:40:29 PM
	2.01 Appropriate			
⊟	3. Reimbursement Request Reasonable, Necessary, and Allocable	OK ⌄	Reviewer Name	2/12/2026 5:40:29 PM
	3.01 Reasonable, Necessary or Allocable			

13. When the review is complete, Department staff will change the instrument status to ***TDOE Reimbursement Request Director Approved***.

Reimbursement Request Review Sections

LEA Name (000) Public District - FY 2026 - Reimbursement Request Review - Rev 0

Status: TDOE Reimbursement Request Review Director Approved

Change Status To: Revision Started

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