

# DISTRICT DAC FUNDS REQUEST

CHICAGO POLICE DEPARTMENT / OFFICE OF COMMUNITY POLICING (OCP)

OCP APPROVAL



**SUBMITTED TO: OPSA FINANCE**

**FROM:**

Enter District-Unit #  
Example: 001

Telephone (Bell)

PAX #

FAX #

**REFERENCE NUMBER:**

**ENGAGEMENT DATE:**

Check Box:

Engagement Date Does Not Apply

**DESCRIBE ENGAGEMENT:**

**INCLUDE LOCATION(S) WITH DESCRIPTION OF ITEMS AND/OR SERVICES THAT REQUIRE FUNDING.**

**DAC CHECK MADE PAYABLE TO:**

NAME OF VENDOR, ORGANIZATION OR PERSON

**TOTAL AMOUNT REQUESTED:**

(ENTER SUM OF ALL RECEIPT AMOUNTS BELOW.)

ENTER THE TOTAL OF EACH INDIVIDUAL RECEIPT BELOW FOR THE ABOVE REFERENCE TOTAL. **DO NOT INCLUDE ANY TAXES ON THE RECEIPT!** Tax amounts will NOT be approved for payment or reimbursement.

Members should present a "CITY OF CHICAGO TAX EXEMPT CERTIFICATE/LETTER" when purchasing goods and services from vendors.

1.	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	2.	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	3.	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	4.	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	5.	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>
6.	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	7.	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	8.	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	9.	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	10.	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>

Signatures of Approval (All 4 Required)

Enter # of Attached Pages:

Requesting Member: \_\_\_\_\_ Star # \_\_\_\_\_

CPO Sergeant: \_\_\_\_\_ Star # \_\_\_\_\_

DAC Chair: \_\_\_\_\_

District Commander: \_\_\_\_\_

Make a copy of this completed form (top page of your DAC packet) and "Hand Carry Only" with original receipts and all corresponding docs **PLUS one extra copy of all documents** to the OCP UNIT, 4th Floor, 4SW. Your extra copy of the top page will be stamped received for your records.

**OCP UNIT ONLY**  
**Reimbursement Request Submission**  
**Verified Stamp or Signature with Date**

## INSTRUCTIONS FOR ATTACHING RECEIPTS

1. All receipts **MUST** be legible. (If not, reimbursements may be declined.)
2. The original receipts or invoices must be attached with staples to 8 1/2" x 11" (letter size) white paper.
3. Each receipt must be visible and the receipts must not overlap each other.
4. Enter the reference number on each page of receipts. For receipts that are longer than a standard 8 1/2" x 11" sheet of paper - cut the receipt to fit on the page using multiple pages, if necessary.
5. Do **NOT** attach receipts with tape. Please attach with staples only.
6. Only original receipts are acceptable and must include the following:
  - A. The date of purchase, and name, address and telephone number of the business from which items or services were purchased.
  - B. An itemized description of items or services purchased.

Any receipt that does not include the above requirements may result in the receipt **NOT** being approved for reimbursement.