NV OCL CS Goods & Services Request



Goods & Services Request



Overview

- ✓ Requests follow the payroll schedule & are processed based on the date received
- ✓ The employer or Service Coordinator can submit the request form for services approved on the budget
 - ❖ Please note: Vendor Payments & Goods Purchasing utilizes the participant's Chore Assistance authorization and must be authorized on the participant's spending plan
- ✓ Acumen verifies services have been approved on the budget before making the purchase

Vendor Payments

- ✓ Vendors cannot be paid if on the excluded individuals and entities list
- ✓ When a vendor payment is made, a <u>W-9 form</u> must be completed by the vendor, submitted, and received by Acumen before payment.
- ✓ Acumen issues a check made payable to the vendor, which is mailed to the vendor as requested.

Goods Purchasing

✓ Screenshots and/or links for items to be purchased on behalf of the participant can be submitted along with the request form

Goods & Services Request Form



- For services rendered:
 - ✓ Employer or Service Coordinator attaches a copy of the itemized receipt(s) or invoice(s)
 - ✓ Employer and Service Coordinator sign the form & submit to Acumen
- For requests for items to be purchased by Acumen on behalf of the participant:
 - ✓ Employer or Service Coordinator submits screenshots and/or links to the items to be purchased along with the form
 - Please note: The total amount must include shipping
 & tax where applicable
 - ✓ Employer and Service Coordinator sign the form & submit to Acumen
- For price changes/differences:
 - ✓ If the item price does not exceed the approved amount, Acumen makes the purchase even if the price changes from the time submitted to the time purchased.
 - ✓ For price changes/differences within 10%, Acumen will make the purchase. Above 10%, Acumen will not make the purchase.

Acumen Fiscal Agent NV OCL-CS Goods & Services Request Form						
Participant Name:				Participant ID #:		
Employer Name:				Request Date:		
Please select one request type: Goods Purchase Vendor Payment **Acumen to place order with Vendor** **Check payable to Vendor**						
Payment Instructions (Vendor Payment ONLY)						
Make Payment Payable To:						
Mailing Address:			Mailing City/ State/Zip:			
Purchase Information (Goods Purchase ONLY) *purchase will be completed for items within 10% of listed price on this form						
Vendor Name:			Vendor \	Vendor Website:		
			Vendor Phone Number:			
Delivery Address:			Delivery	elivery Method: Home Delivery (list address)		
bentaly Addicase			,			
☐ In-Store Pick Up						
Invoice/	Service	Description (online purchases must include Item #, Total Amount				
Service Date	Code	number of items, screen	shot of ite	m, color, and size)		
		Total Payment Amount (must include shipping)				
Return this form to Acumen by email, fax, or mail. Include a copy of the receipt, invoice, or signed bid/estimate.						
By signing this form, I attest that services were delivered and received consistent with the Participant Budget and I have rendered and/or approved this 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 my repayment of claim.						
Employer Signature				Date		
Service Coordinator Signature Date						
Acumen Fiscal Agent, LLC. 5416 E. Baseline Rd., Suite 200						
	Mesa, AZ 85206 Phone: (866) 644-4188					
Fax: (866) 496-4551 NV OCL CS 1- vendor-nv@acumen2.net						
		vendor-nv@a	cumen2.net			