

**Developmental Disabilities Resource Board
Secondary Start-Up Availability and Reimbursement Request
For ILA or ISL Recipient**

GENERAL INFORMATION:

Individual's Name: _____ Date of Contact with lead agency : _____
 Is this ISL or ILA? _____ Lead Agency: _____
 Date the individual is to move _____ List Roommate(s): _____
 Amount of start up funds available _____ Prior residence: _____
 DMH Service Coordinator: _____ Contract/Corporate Information Needed? _____
 Lead Agency contact regarding receipts: _____ Items to Send: Contract – Corp Info. - Policy
 Phone Number: _____
DDR B Representative: _____ **Date:** _____

START-UP ITEMS LIST:

DDR B Start-Up Items List: An itemized list must be completed for each individual. The list can be used as a tool to assist the person shopping. Items listed will be considered as owned by the individual for whom the list was compiled. This is the one list that should be submitted, on behalf of this individual, for reimbursement. **Items eligible for reimbursement are restricted to the items listed below.**

For reimbursement: list the amount spent (per receipts) next to the line item. Receipts must be attached to this list document. All receipts must be submitted to the DDR B within 90 days of the earliest purchase/receipt date.

Housing/Moving Expenses	Indicate amount of receipt(s)	✓
Moving Fees		
1 st months rent and security deposit (one month only)		
Utility hookup fees		
Utility deposits		
Appliances Items	Indicate amount of receipt(s)	
Dryer (1)		
Microwave and Stand (1)		
Refrigerator (1)		
T.V. (1)		
Vacuum (1)		
Washer (1)		
Portable Dishwasher		
Bathroom Items	Indicate amount of receipt	
Bedroom Items	Indicate amount of receipt	
Dresser (1)		
Mattress set/frame		
Night stand (1)		
Window treatment		
Bookcase		
Bed Linens		
Clothes Hamper		

Furniture Items	Indicate amount of receipt	✓
Couch (1)		
End table (1)		
Kitchen table (1) chairs (4)		
Recliner/chair (1)		
TV Table (1)		
Window treatments		
Rugs		
Kitchen Items	Indicate amount of receipt	
Bakeware/cookware		
Pots/pans skillets		
General Items	Indicate amount of receipt	
Lawn mower		

TOTAL START UP FUNDS REQUESTED: \$ _____