

**Tennessee Department of Human Services  
INSTRUCTIONS FOR USE OF FORM HS-3465  
Community and Social Services Invoice for  
Reimbursement**

**1. Purpose of the form**

The purpose of the form is for agencies to request reimbursement from the state of Tennessee for contracted services provided to clients

**2. When it is used**

Every month when reimbursement is requested

**3. Who completes the form**

Contracting Agency Staff

**4. An explanation of what goes into any field that is not clearly self-explanatory or any additional information needed to process this form (e.g. routing, processing etc.) n/a**

**5. Who needs the original and where should it be filed**

SSBG Intake Admin Secretary receives and files in the Contracting Agency financial files

**6. Who needs a copy and where should it be filed**

SSBG Program Coordinator who files copy in the SSBG H drive

**7. Length of time the form must be maintained after the service is rendered/case closed**

6 years