

Attachment 4

**FY 2024-25 COVER FORM**

**PURCHASE OF APPROVED DRUG SCREENING EQUIPMENT (ADSE)**

Please complete and submit the following cover form and final paid invoices related to your order to [SafetyPlanning@ontario.ca](mailto:SafetyPlanning@ontario.ca) **by March 31, 2025.**

Police Service:

Supplier/Company:

Order date:

Received date:

Number of devices purchased:

Number of swabs purchased  
(if applicable):

Number of QA kits purchased  
(if applicable):

Total (**before tax**) for reimbursement:

**Note:**

- Approved drug screening devices and related equipment purchased by police services between April 1, 2024, to March 31, 2025, are eligible for reimbursement for the 2024-25 fiscal year.
- There may be multiple components to an order for drug screening device(s). Please ensure that your invoice(s) includes all components before submitting to the ministry. If your invoice is missing components or contains any errors, please contact the supplier directly for correction.
- If your police service has previously procured a device(s), the purchase of additional swabs and QA kits to support the continued use of the device(s) are also eligible for reimbursement.
- Reimbursements will be issued based on a first come, first served basis.
- Reimbursement will be issued upon receipt of all required documents to the ministry. ***The ministry will not process payments if the required documentation is incomplete.***
- **Note:** HST and annual extended warranty are ***not eligible*** for reimbursement.