**CDOT Local Agency Web Resource**

**Flowchart 2A: Consultant Management and Monthly Reimbursement**

**Local Agency Checklist**

|  |  |  |
| --- | --- | --- |
|  | **Date Completed** | **Action** |
|  |  | **Consultants submit monthly reimbursement request** |
|  |  | **LPA receives monthly reimbursement request** |
|  |  | **LPA review of monthly reimbursement request** |
|  |  | **LPA reimburses consultant(s)**  |