



**DEPARTMENT OF HEALTH & HUMAN SERVICES**

Health Resources and Services  
Administration

Bureau of Health Professions

Rockville, Maryland 20857

November 3, 2005

To: Lenders and Holders Participating in the Health Education Assistance Loan (HEAL) Program

Subject: Evidence of Disbursement - HEAL Lender Policy Memorandum L-2006-2

Policy L-2006-2 is issued as a supplement to Policy L-95-04. Proper documentation of HEAL loan disbursements has been an issue on a number of recent claims. The following forms of documentation are acceptable.

- Copies of the disbursement checks

The following items may be submitted if accompanied with a fully executed affidavit:

- Electronic Funds Transfer (EFT) roster
- Lender/Service computer generated document with:
  - Date of disbursement,
  - Amount of disbursement and
  - Unique identifier for each borrower or disbursement such as a check number, EFT roster number, social security number, file number or warrant number.
- Signed letter on school letterhead providing the loan disbursement information.
- Disclosure statement detailing the disbursement information and specifying a check was attached (this form need not be signed or dated).

Claim packages that do not contain one of the above forms of documentation for each loan will be returned unpaid to the lender/service.

If you have questions concerning this policy, please call Mr. Dick Horton on (301) 443-1541.

Sincerely,

Henry López, Jr.  
Director  
Division of Health Careers Diversity  
and Development