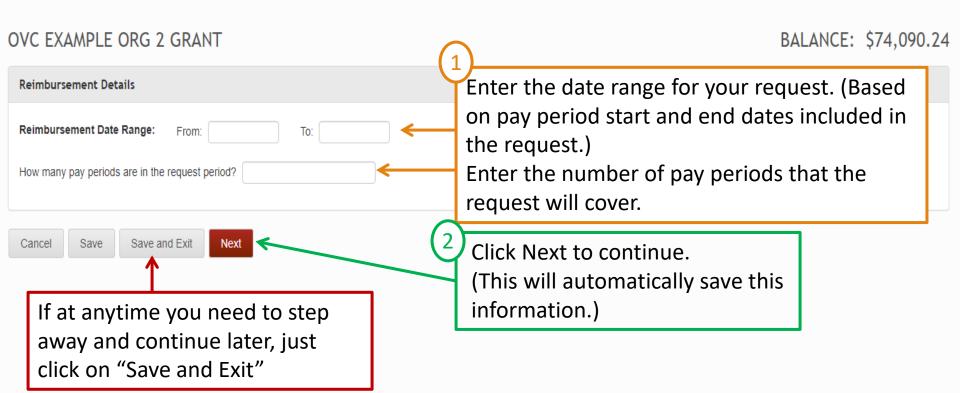
Building a Reimbursement Request



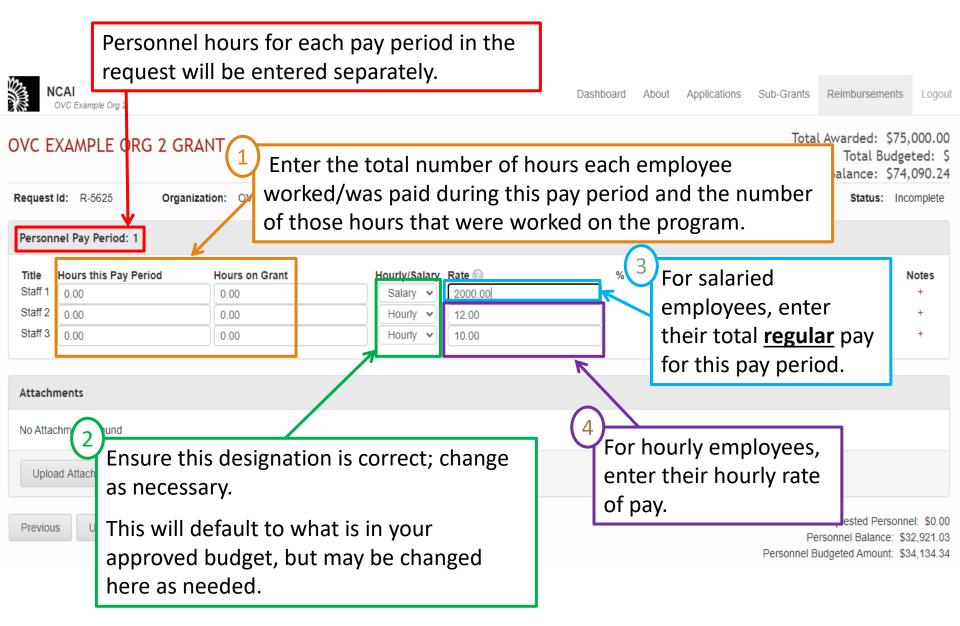
ashboard About Applications Sub-Grants

Reimbursements

Logout



If you do not have any personnel costs during this reporting period to claim and are just submitting for general expenses, the date range reflected should encompass the dates the general expenses were incurred and you would enter "0" for number of pay periods in the request period.



Upload Attachment

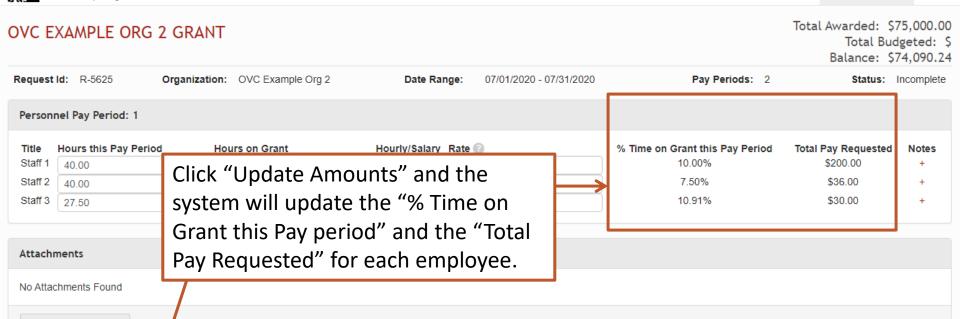
Update Amounts

Save

Save and Exit

Next

Previous



19

Total Requested Personnel: \$266.00

Personnel Balance: \$32,921.03 Personnel Budgeted Amount: \$34,134.34

OVC EXAMPLE ORG 2 GRANT

Total Awarded: \$75,000.00

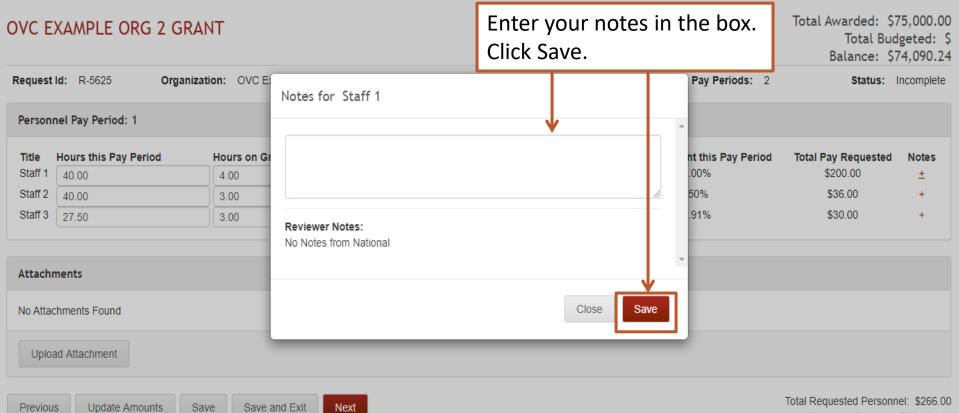
Total Budgeted: \$ Balance: \$74,090.24

Request	ld: R-5625 Or	ganization: OVC Example Org 2	Date Ra	inge: 07/01/2020 - 07/31/2020	Pay Periods: 2	Status:	Incomplete		
Personi	nel Pay Period: 1								
Title Staff 1 Staff 2	Hours this Pay Period 40.00 40.00	4.00 3.00	Hourly/Salary Salary Hourly	2,000.00	% Time on Grant this Pay Period 10.00% 7.50%	Total Pay Requested \$200.00 \$36.00	Notes + +		
Staff 3	27.50	3.00	Hourly V	10.00	10.91%	\$30.00	+		
Attachr	nents								
No Attachments Found				Click the "+" to the right of a line item to					
Upload Attachment				add any appl	add any applicable notes or clarifications.				
Dreviou	Lindate Amounts	Save Save and Evit No.	<i>d</i>			Total Requested Person	inel: \$266.00		

Line item notes are <u>not required</u> in this section, unless there is something specific that needs to be clarified (a staffing change, pro-rating a salary, etc.).

Personnel Balance: \$32,921.03 Personnel Budgeted Amount: \$34,134.34

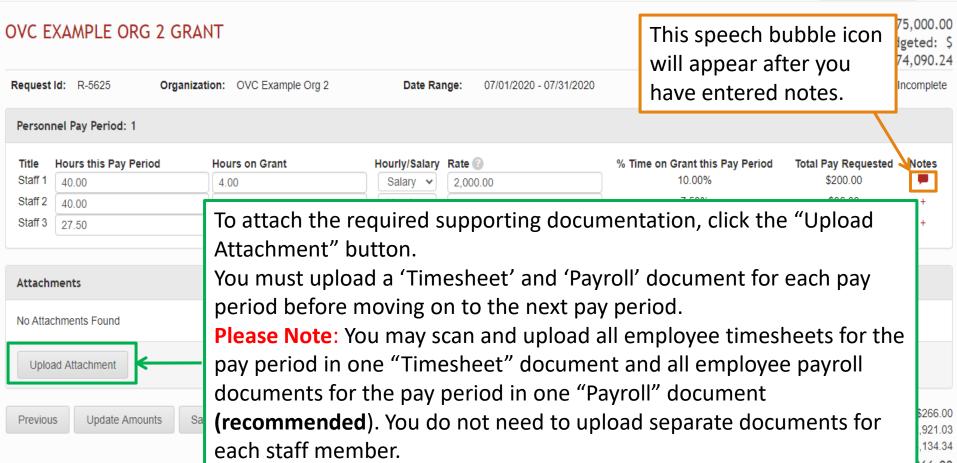




Personnel Balance: \$32,921.03

Personnel Budgeted Amount: \$34,134.34

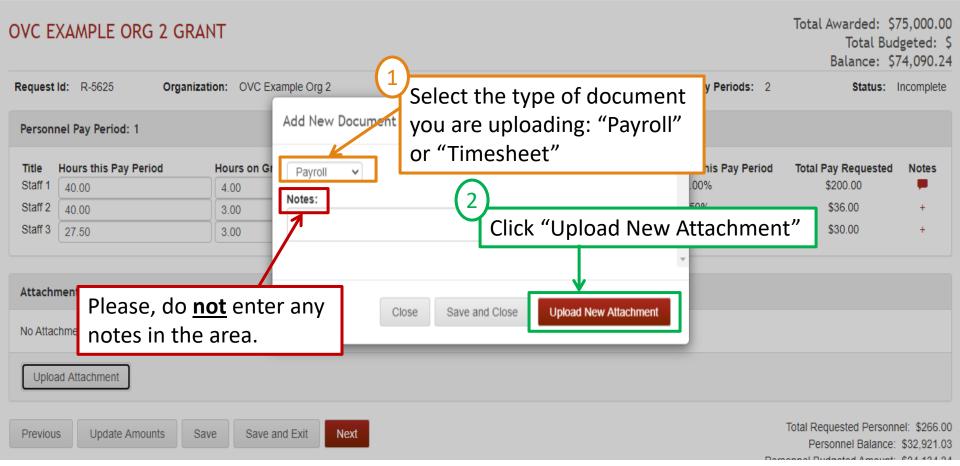


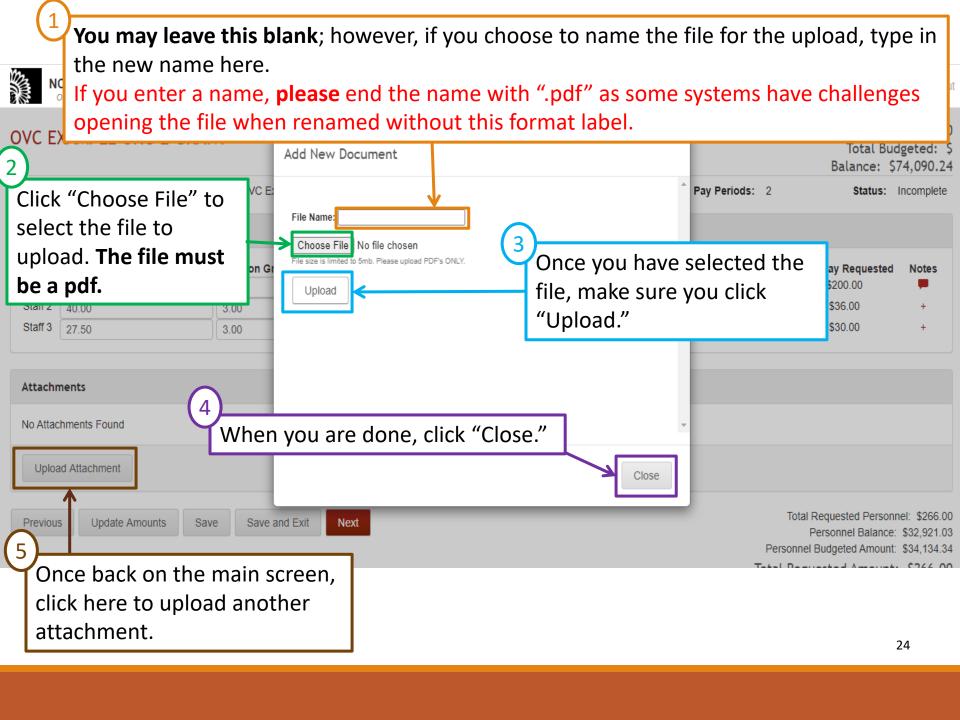


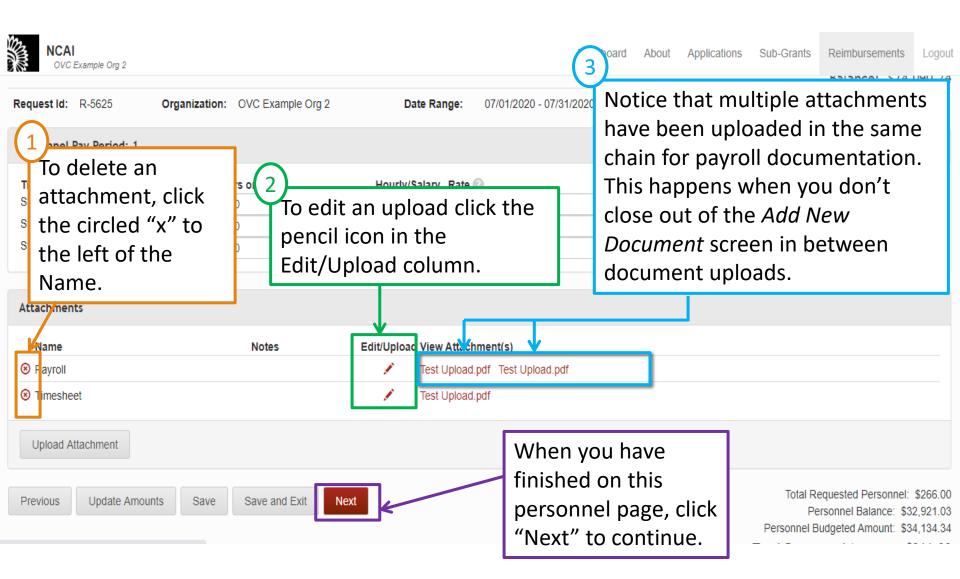
If scanning and uploading all timesheets together and all payroll documents together, documents need to be in the same order as staff appear on the reimbursement request in order to help expedite processing by the reviewers.

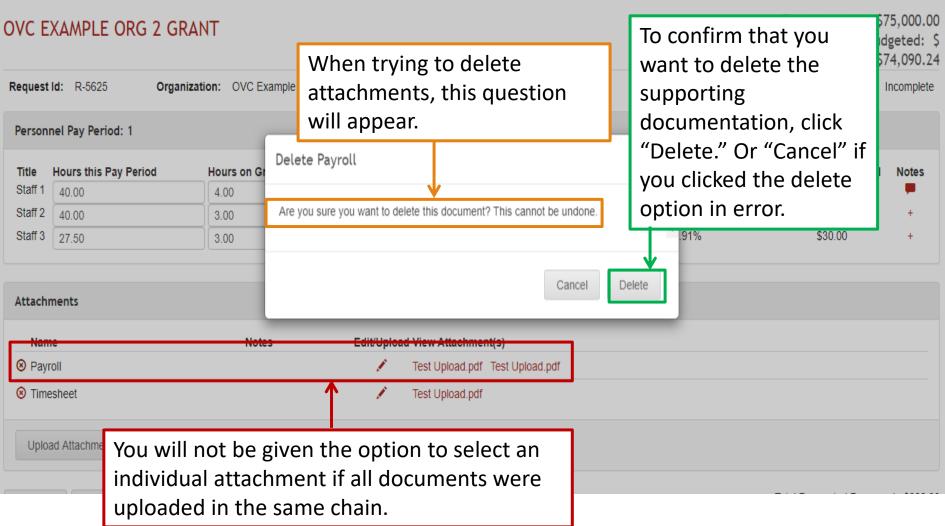
Sub-Grants













OVC EXAMPLE ORG 2 GRANT

Total Awarded: \$75,000.00

Total Budgeted: \$

Balance: \$74,090.24

Request	id: R-5625 Organiz	ation: OVC Example Org 2	Date Range.	07/01/	12020 - 07/31/2020		Pay Periods: 2	Status.	incomplete
Personnel Pay Period: 1									
Title Staff 1	Hours this Pay Period	Hours on Grant	Hourly/Salary Rate Salary • 2,0	e ?		% Time on	Grant this Pay Period 10.00%	Total Pay Requested \$200.00	Notes
Staff 2	40.00	3.00	Hourly 🗸 12	.00			7.50%	\$36.00	+
Staff 3	^{27.50} This is how	w the screen wi	ill appear if s	วตตม	orting doc	ument	ation is uplo	paded	+
			• •	• •	•		•		
	maividual	ly (closing the A	add New Doc	ume	nt box art	er eac	n upioad).		
Attachments									
Nan	e	Note	s	Edit/Uplo	ad View Attachmen	t(s)			
Payr	oll			1	Test Upload.pdf 1	-			
⊗ Payı	oll			1	Test Upload.pdf 4	-			
⊗ Time	esheet			1	Test Upload.pdf	—			
Uploa		now have the oument you may	•		xactly whi	ch			

Save and Exit

Next

Save

OVC EXAMPLE ORG 2 GRANT

Previous

Update Amounts

Dashboard About Applications Sub-Grants

Reimbursements

Logout

Total Awarded: \$75,000.00 Total Budgeted: \$

Balance: \$74,090.24

Request Id: R-5625 Organization: OVC Example Org 2 Pay Periods: 2 Status: Incomplete Date Range: 07/01/2020 - 07/31/2020 You will repeat the previous steps for Personnel Pay Period: 2 each pay period within the request. **Total Pay Requested** % Time on Grant this Pay Period Hours this Pay Period Title Notes Staff 1 0.00% \$0.00 0.00 Salary 0.00 Staff 2 0.00% \$0.00 0.00 Hourly ~ 12.00 0.00 Staff 3 0.00% \$0.00 0.00 Hourly ~ 0.00 10.00

Attachments	
No Attachments Found	
Upload Attachment	

Total Requested Personnel: \$266.00 Personnel Balance: \$32,921.03

Personnel Budgeted Amount: \$34,134.34

T-1-1 D-----1 A------ 6207 02

Personnel

- Time cards or attendance records are needed for all employees. Time worked on the program needs to be clearly identified and based on actual hours worked, not estimated hours worked.
- Time cards or attendance records must be signed by both the employee and supervisor.
- The grantee must follow their own written policies about overtime pay, and must document that any over-time pay was approved prior to the employee incurring the overtime hours.
- Only split pay periods at the beginning and end of the grant cycle, and at the end of the calendar year as necessary.

Personnel (cont'd)

- Staff members' titles must match the titles in your approved budget. Position titles, as listed in the reimbursement request, should also be indicated on the pay stub/payroll ledger and/or time sheet/activity reports.
- Submit the payroll supporting documentation (pay stub or payroll ledger) for each pay period covered in the reimbursement request.
 Supporting documentation must be separately uploaded for each pay period for which reimbursement is being requested.
- Supporting documentation should clearly identify the pay period start and end dates.

Personnel (cont'd)

- Personnel costs will be entered separately for each pay period.
- Reimbursement requests for salaried employees will be entered as:
 - 1. Total number of hours worked/paid for during the pay period
 - 2. Total number of hours worked on the program during the pay period
 - 3. Ensure hourly/salary designation is correct, change if necessary
 - 4. Total **regular gross** salary for the pay period
 - 5. Enter notes if applicable
- Reimbursement requests for <u>hourly</u> employees will be entered as:
 - 1. Total number of hours worked/paid for during the pay period
 - 2. Total number of hours worked on the program during the pay period
 - 3. Ensure hourly/salary designation is correct, change if necessary
 - 4. The employee's hourly wage
 - 5. Enter notes if applicable

Personnel (cont'd)

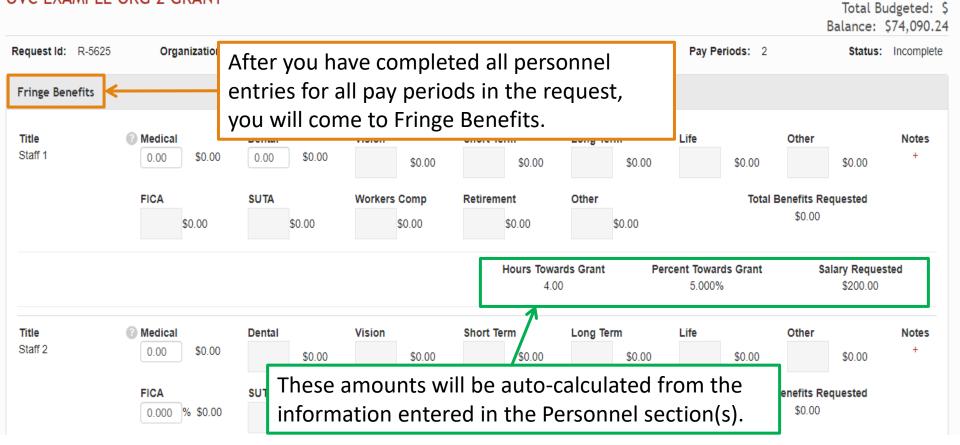
Entries for multiple pay periods within a request need to be entered in chronological order.
 (e.g., Pay Period 1: 9/2 – 9/15; Pay Period 2: 9/16 – 9/29; Pay Period 3: 9/30 – 10/13, etc.)

- If a staffing change occurs, add a comment in the applicable line item to note the staffing change.
- If you plan to submit all payroll documentation and timesheet documentation as a single files, please ensure the documents are scanned in the same order that staff are listed on the request. This helps us process your request faster.

Total Awarded: \$75,000.00







Please Note: Only fringe included in the approved budget can be entered. Items not included in the approved budget cannot be entered and will appear light grey. OVC Example Org 2 Medical Long Term Dental Vision Short Term Life Other Notes Staff 3 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 **FICA SUTA** Retirement Other Total Benefits Requested Workers Comp \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 In the top line, enter the appropriate premium amount for **Percent Towards Grant** Salary Requested \$30.00 the full request period. In the second line, enter percentage-based fringe. Update Amou Please make sure the percentages being requested for WC, SUTA, etc. match the supporting documentation that is attached to the approved budget. Attachments No supporting documentation is needed for FICA. No Attachments Foun Upload supporting documentation for any fringe benefits included in the Upload Attachment request, with the exception of FICA. Total Requested Benefits: \$0.00 Save and Exit Previous Save Next Benefits Balance: \$1,213,31 Benefits Budgeted Amount: \$1,213.31 Total Requested Amount: \$297.92 When you have finished on this page, click "Next" to continue. 34

Fringe Benefits

- Fringe benefits that are paid as a set amount each month will be entered as the applicable monthly premium amount (less employee contributions) for the reimbursement request period. (e.g., health, life, disability insurance premiums)
 - ✓ The system will calculate the reimbursable amount related to the percentage of time worked on the program based on the entries in Personnel.
- If premium rates are adjusted (e.g., subtracting employee contributions, adjusting a family rate to an employee only rate, etc.), this information needs to be provided in the notes or directly on the supporting documentation.
- Documentation is required that identifies benefits claimed for applicable staff members.

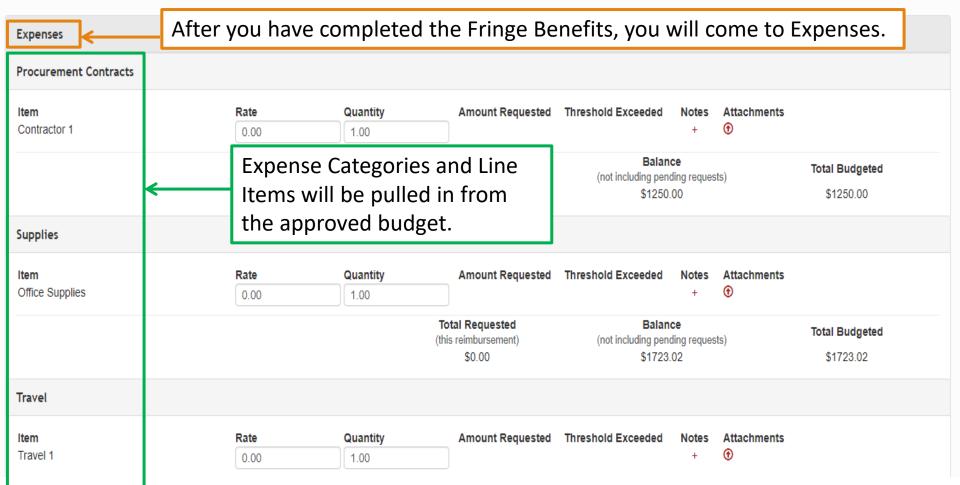
Fringe Benefits (cont'd)

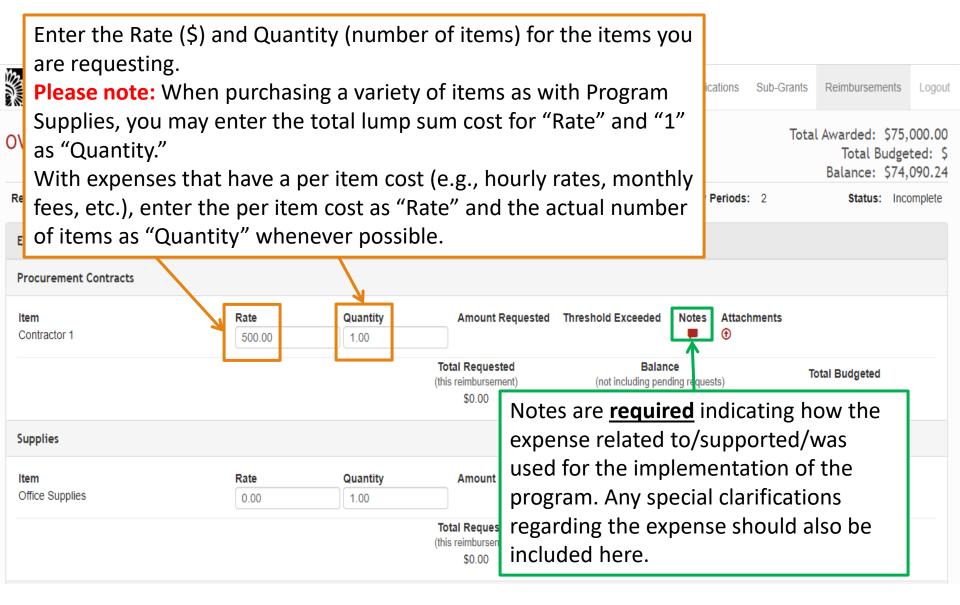
- Fringe paid out based on percentage of salary will be entered as the applicable fringe rate percentage (e.g., 7.65% FICA)
 - ✓ The system will calculate the reimbursable amount based on the entries in Personnel.
- Rates such as WC, SUTA, etc. that are being requested must match the supporting documentation attached to the budget for these percentages.
- If the covered period of time on the documentation verifying your WC, SUTA, etc. rates attached to your approved budget expires before the dates of the request, new documentation will need to be uploaded to your budget verifying the correct rate for this time period.
- Supporting documentation for rates such as WC, SUTA, etc. must also be uploaded directly to the reimbursement request.

07/01/2020 - 07/31/2020

Pay Periods: 2

status: incomplete



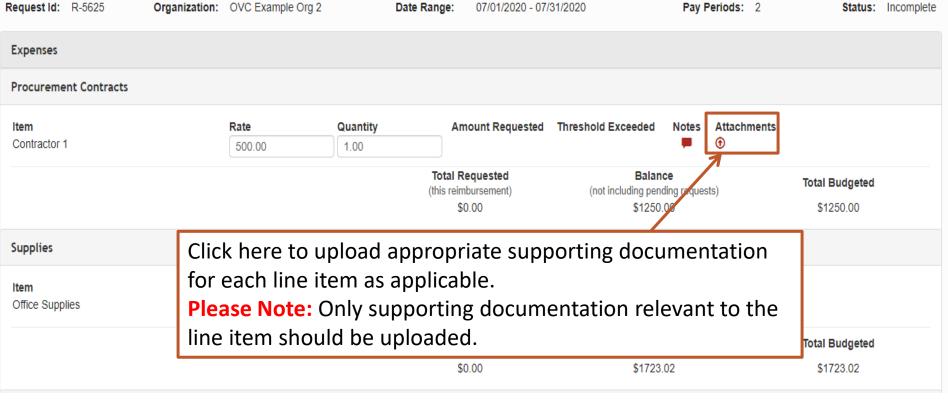




OVC EXAMPLE ORG 2 GRANT

Total Awarded: \$75,000.00

Total Budgeted: \$ Balance: \$74,090.24



You may leave this blank; however, if you choose to name the file for the upload, type in the new name here.

If you enter a name, **please** end the name with ".pdf" as some systems have challenges opening the file when renamed without this format label.

challenges opening the file when renamed without this format label. 5.000.00 OVC EXAMPLE ONG Z GRAINT Total Budgeted: \$ Balance: \$74,090.24 Upload New Attachment Request Id: R-5625 Organization: OVC Ex Pay Periods: 2 Status: Incomplete File Name: Click "Choose File" Once you have Choose File No file chosen to select the file to 5mb. Please upload PDF's ONLY. selected the file, upload. The file Upload **Attachments** ate make sure you 0.00 must be a pdf. click "Upload." **Total Budgeted** requests) \$1250.00 **Supplies** When you are done, click "Close." Close Item Rate otes Attachments Office Supplies 0.00 Total Requested Balance **Total Budgeted** (this reimbursement (not including pending requests) \$1723.02 You will receive a confirmation message if your upload was successful.

Repeat as necessary to upload multiple documents.

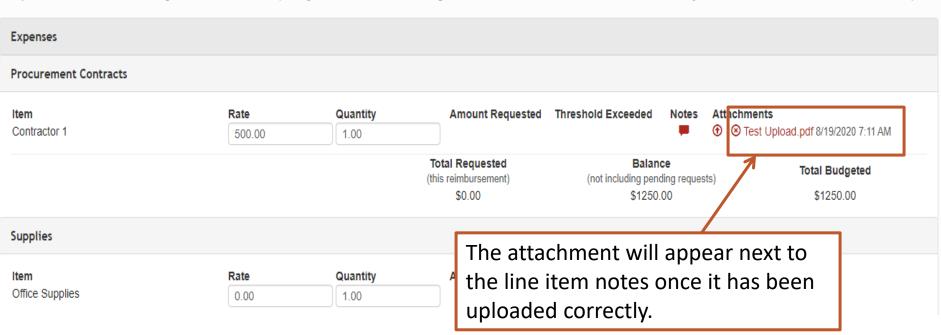
Logout

OVC EXAMPLE ORG 2 GRANT

Total Awarded: \$75,000.00

Total Budgeted: \$ Balance: \$74,090.24

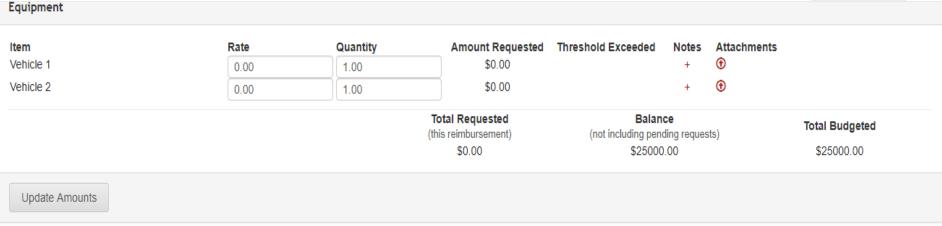
Request Id: R-5625 Organization: OVC Example Org 2 Date Range: 07/01/2020 - 07/31/2020 Pay Periods: 2 Status: Incomplete

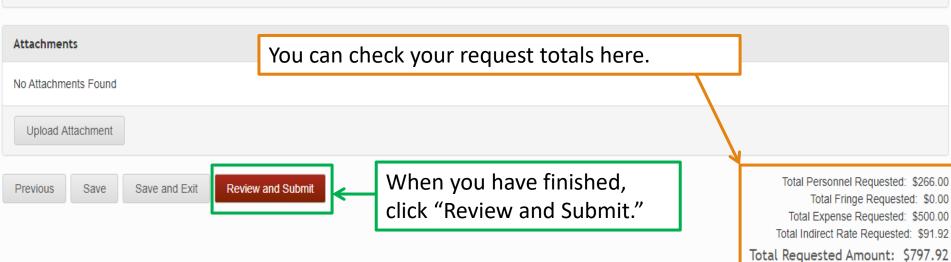


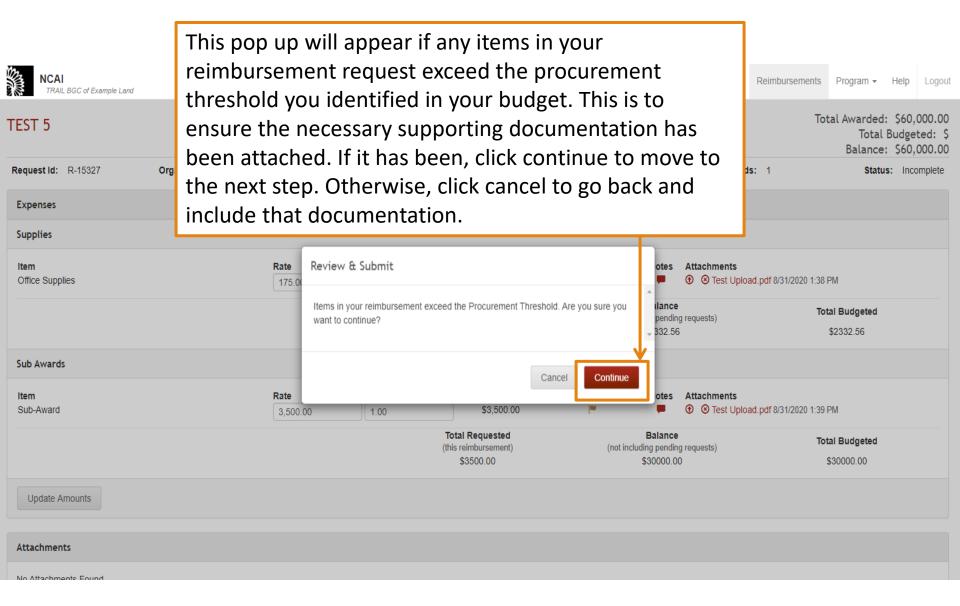


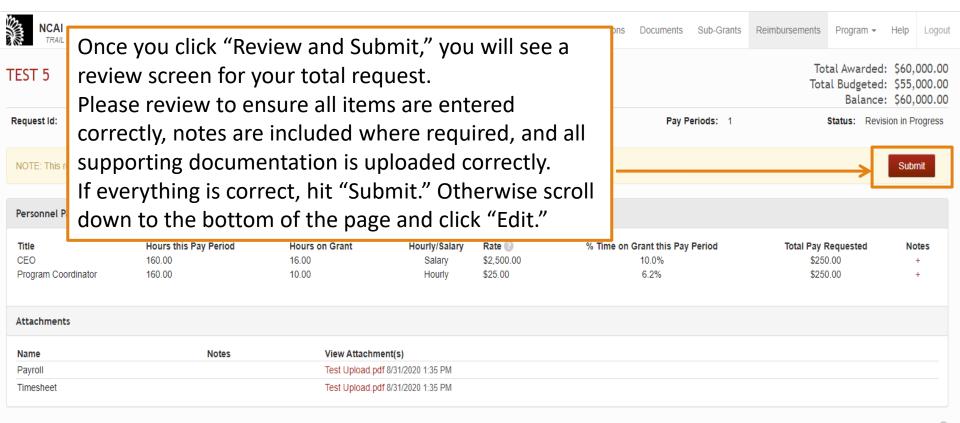
Reimbursements











Total Personnel Requested: \$500.00 🚇

Submitted Personnel Balance: \$20,099.83 @

Personnel Balance: \$20,599.83

Personnel Budgeted: \$20,599.83



Dashboard Applications Documents Sub-Grants Reimbursements

Program ▼

TEST 5

Request Id: R-15327

Total Awarded: \$60,000.00 Total Budgeted: \$55,000.00

Ralance: \$60,000,00

Status: Pending First Approval

Personnel Pay Period: 1

CEO Program Coordinator Hours this Pay 160.00 160.00

Once you hit submit, the Status will change to "Pending First Approval."

Test Upload.pdf 8/31/2020 1:35 PM

Date Range:

08/01/2020 - 08/31/2020

Crant this Pay Period 10.0% 6.2%

Pay Periods: 1

Total Pay Requested Notes \$250.00 \$250.00

Attachments

Timesheet

Title

Name Notes View Attachment(s) Payroll Test Upload.pdf 8/31/2020 1:35 PM

Organization: TRAIL BGC of Example Land

Total Personnel Requested: \$500.00 @

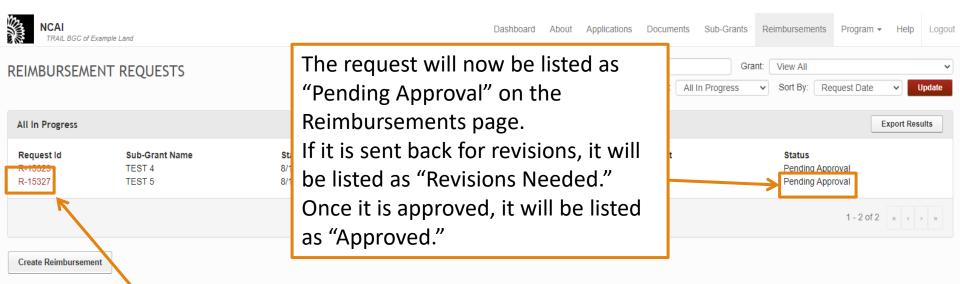
Personnel Balance: \$20,599.83

Submitted Personnel Balance: \$20,099.83

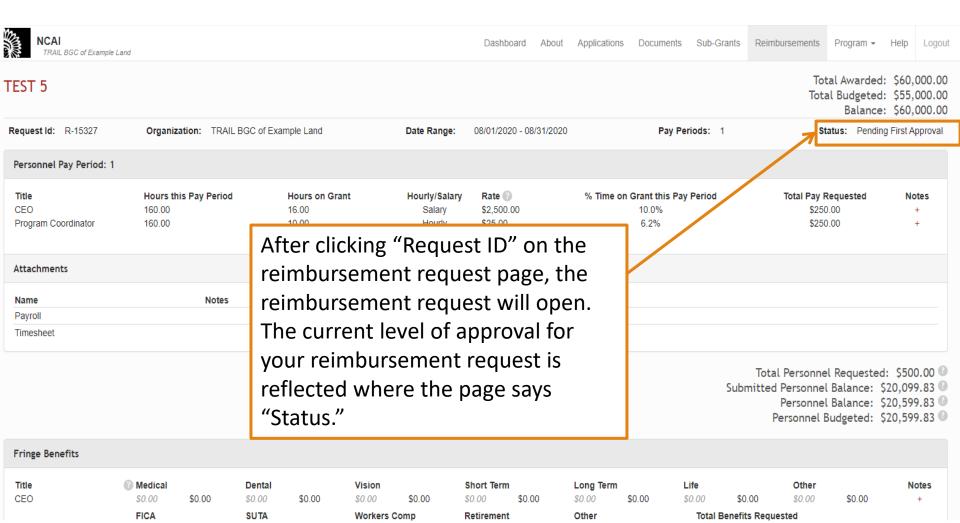
Personnel Budgeted: \$20,599.83

Fringe Benefits

Title Medical Dental Vision **Short Term** Long Term Life Other Notes \$0.00 CEO \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 FICA SUTA Other Total Benefits Requested Workers Comp Retirement 7 0500/ ሰባባ 4ባ 040.40 4 00000 **#0.00** 0.00000 0.00000 ተለ ለለ



To see exactly which level of approval the reimbursement request is at, open the reimbursement request by clicking on the "Request ID."



Gift Cards

- There is a high level of scrutiny around the purchase and use of gift cards by DOJ and the Office of Inspector General (OIG).
 - Generic gift cards (e.g., Visa gift cards) are not allowed.
 - Gift cards and vouchers can only be used for emergency needs. Cannot be used for staff.
- Must comply with internal controls around the distribution and use of these items. (Additional TA will be provided).
 - Must have a system for tracking distribution that upholds confidentiality.
 - Prior to expending funds on cards or vouchers, subgrantee shall submit a copy of subgrantee's internal policies and procedures regarding the purchase, storage and disbursement of cards or vouchers to the NCAI Fund and/or its technical assistance providers.

Gift Cards

- Proper purchase and use of gift cards, including the required documentation is needed for reimbursement of cards and vouchers.
 - There is a \$5,000 limit on the amount of gift cards that can be outstanding at any time during the grant.
 - You will be required to submit proof of gift card distribution in order to request additional reimbursement beyond \$5,000. This documentation can be whatever is used internally or we can provide a template.
 - Documentation should not have any personally identifiable information that would violate victim confidentiality.
 - NCAI is confirming with OVC what the requirement is for unused gift cards at the end of the grant. Additional information will be provided as soon as possible.
 - Past audits have questioned the amount of gift cards distributed compared to expected costs, so we recommend that you keep internal documentation to justify the distribution of all disbursements.