

# **Introduction and Budget Development Overview**

# Coming Up Today

- Upcoming deadlines and trainings
- Important budget related updates for the 2019 program year
- LOA Updates
- Logging in to the system
- Live walk-through of budget entry



# Upcoming Deadlines & Trainings

- Office Hours: 4/17 & 4/18
- Program Implementation Webinar (LOA walk-through): 4/24
- Budgets Due: 4/26
- Reimbursement Request Webinar: 4/26
- 1<sup>st</sup> Monthly Report Due: 6/5
- 1<sup>st</sup> Reimbursement Request Due: 6/15



# Required Expenses

- Curriculum
  - Budget \$1,000
  - Further details will be provided
- Community Service Project
  - Budget \$2,000 (approximately)
  - Further details will be provided
- Youth Mentoring Summit
  - Returning sites should use last year's expenses as a baseline
  - Further details will be provided for all grantees



# Personnel Reminders

- Personnel should account for no more than 75% of your budget (approximately)
- Administrative Personnel (Executive Director, Finance Coordinator, etc.) should account for no more than 10% of your budget:
  - Does not apply if these staff members *also* help with program implementation – if this is the case it should be clearly noted



# Supplies

- No Equipment over \$500 in value
  - Includes laptops, large sports equipment (boxing rings, basketball hoops, heavy bags, etc).
- Supplies CAN include:
  - General office supplies (paper, printer cartridges, etc.); sports supplies (basketballs, baseballs, boxing gloves, mouth guards, etc).
  - Any individual items over \$50 in value should have their own line item



# Travel

- The NPAL Youth Mentoring Summit in July is the only official travel event that can be covered by the grant
  - Further details TBA
- Field trips should involve Mentees and Mentors and be related to the mentoring curriculum in some way
  - NO overnight trips will be reimbursed



# LOA (Letter of Agreement)

- This will outline ALL requirements of the 2019 Mentoring program in detail
- Will be sent and signed electronically via the online reporting system
- Will not be sent until after budget approval
- Will require 2 signatories – CEO and Board Member or other authorized signer





# **NPAL Mentoring Entering the Budget into the Online Reporting Site**



# How to Log into the Online Reporting Site

<https://firstpic.force.com/npal>





Username

Password

☒ Remember me

[Forgot Your Password?](#)

- The login credentials for returning organizations remain the same as last year.
- CEOs for all new organizations who submitted an application for the 2019 NPAL Mentoring program should have already received this email. If you did not, please email [support@firstpic.org](mailto:support@firstpic.org) for assistance.



HELLO NPAL LOCAL ADMIN.

Please note: We do not have youth demographic information on file for you

Once logged into the online reporting site, select “Sub-grants” to enter a budget.

You do not have a SAM.gov expiration in the system. Please ensure that you have a DUNS number and that it is properly registered through SAM.gov. Updating SAM.gov does not automatically update this system. Please submit your updated registration date via the About tab. Please contact Angie Caffee with any questions at [acaffee@nationalpal.org](mailto:acaffee@nationalpal.org). Please update your SAM.gov registration [here](#). Further instructions available [here](#).

#### What's New/System Updates

- The default sort order for all Reimbursement List pages will now be Request Date (was previously request ID).
- CEOs are now able to request access to the site by assigning a user profile to a contact under the About tab.

#### Incomplete Reimbursement Requests

No Incomplete Reimbursement Requests Found

#### Reimbursement Requests Sent Back

No Reimbursement Requests Sent Back Found

#### Overdue Progress Reports

No Overdue Progress Reports Found



## SUB-GRANTS

Grant:

Sub-Grant Name:

Status:

Sort By:

[Update](#)

[View All](#)

[Export Results](#)

Sub-Grant Name	Awarded	Total Budgeted	Requested Amount	Approved Amount	Balance	
<a href="#">2019 NPAL Mentoring Example Land</a>	\$34,200.00	\$0.00	\$0.00	\$0.00	\$0.00	Pending Approval

1 - 1 of 1

« < > »

[View Closed Grants](#)

Click on the sub-grant related to the budget you are creating.  
The Sub-Grant Name for the proposed budget for the 2019  
Program Year will include 2019 Mentoring.



## 2019 NPAL MENTORING EXAMPLE LAND

TOTAL AWARDED: \$34,200.00

**Date Range:** 04/01/2019 - 03/31/2020

**Children Served:** 38

**Total Budgeted:** \$0.00

**Status:** Incomplete

**Requested Amount:** \$0.00

**Approved Amount:** \$0.00

**Balance:** \$0.00

### Personnel & Fringe Notes

No notes from Affiliate

No notes from National

### Expense Notes

No notes from Affiliate

No notes from National

### Attachments

No Attachments Found

[View Reimbursements](#)

[Update Budget](#)

Click "Update Budget" to begin the budget submission process.

# **Adding Personnel and Fringe Expenses**





## 2019 NPAL MENTORING EXAMPLE LAND

**TOTAL: \$ 34,200.00**

Projected # of children served during the Grant performance period:

Sub-Grant Date Range: 04/01/2019 - 03/31/2020

### Add Personnel Items

Delete Items

Name	Title	Hourly ?	Rate ?	Total Hrs/Wk ?	Grant Hrs/Wk ?	% Time on Grant	Start Date	End Date	Total Salary
Name	FICA	Medical	Dental	S.T. Disability	L.T. Disability	Life	Other	Total Fringe Benefits	Notes

Add

To add a staff member to the budget, click the “Add” button.

### Personnel Notes

No notes from National

Update Amounts

Save and Exit

Next

**Total Requested Amount: \$ 0.00**

You must resubmit this budget if changes are made and receive approval on the new budget in order to see these changes reflected in your reimbursement.





## 2019 NPAL MENTORING EXAMPLE LAND

TOTAL: \$ 34,200.00

ected # of children served during the Grant performance period:

38

19 - 03/31/2020

Delete Items

Enter the employee's name

If the employee is hourly, check the box. If the employee is salaried, leave it unchecked.

Name	Title	Hourly ?	Rate ?	Total Hrs/Wk ?	Grant Hrs/Wk ?	% Time on Grant	Start Date	End Date	Total Salary
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		4/1/2019	3/31/2020	

Name	FICA	Medical	Dental	S.T. Disability	L.T. Disability	Life	Other	Total Fringe Benefits	Notes
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$	+

Enter the employee title as it relates to the program.  
This should be short, but descriptive of their role with the program.  
Ex: NPAL Mentoring Program Coordinator, Program Aide, etc.

For **hourly** employees, enter their *hourly rate* of pay.  
For **salaried** employees, enter their *annual salary*.

No notes from National

Update Amounts

Save and Exit

Next

Total Requested Amount: \$ 0.00

You must resubmit this budget if changes are made and receive approval on the new budget in order to see these changes reflected in your reimbursement.



## 2019 NPAL MENTOR

AL: \$ 34,200.00

04/01/2019 - 03/31/2020

1

Enter the total number of hours that the employee works per week.

2

Enter the average number of hours the employee will work on the program each week.

### Add Personnel Items

Delete Items

Name	Title	Hourly ?	Rate ?	Total Hrs/Wk ?	Grant Hrs/Wk ?	% Time on Grant	Start Date	End Date	Total Salary
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		4/1/2019	3/31/2020	

Name	FICA	Medical	Dental	S.T. Disability	L.T. Disability	Life	Other	Total Fringe Benefits	Notes
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$	+

3

Select the start and end date that the employee will work on the program. It will default from 4/1/2019 – 3/31/2020 but should be changed to estimated start and end date for this employee on the program.

Add

### Personnel Notes

No notes from

**Please Note:** Not all employees will be working on the program for the entire grant year. Therefore, the Start and End date should accurately reflect what is appropriate for each staff member.

Update Amounts

Save and Exit

Next

Total Requested Amount: \$ 0.00

You must resubmit this budget if changes are made and receive approval on the new budget in order to see these changes reflected in your reimbursement.



201

0.00

**Please Note:** You are not required to include fringe benefits in your budget, you may leave all or any of these options blank. If you would like to include fringe benefits, proceed with the following steps as applicable.

Projected # of children served during the Grant performance period: 38

Sub-Grant Date Range: 04/01/2019 - 03/31/2020

1 FICA should be entered as the employee's "Total Salary" as determined by the online reporting site x 7.65% (which is equivalent to 0.0765).

**Example:** Jane Doe's total salary is \$17,581.07.  $\$17,581.07 \times 0.0765 = 1344.95$ . Therefore, 1344.95 should be entered in for FICA.

Name	FICA	Medical	Dental	S.T. Disability	L.T. Disability	Life	Other	Total Fringe Benefits	Notes
Jane Doe	0	0	0	0	0	0	0	\$ 0.00	+

2 In this section of the fringe benefits, enter the **annual premium** for any benefits paid as a set rate, that you would like to include.

**Example: Employer** pays \$500 per month towards the Medical Insurance for this employee:  $\$500 \times 12 \text{ mos.} = \$6,000$  annual premium (enter 6,000 in the Medical box)

**The system will automatically calculate the amount allocated to the grant based on information entered here and in the payroll section.**

Update Amounts

Save and Exit

Next

Total Requested Amount: \$ 17,581.07



## 2019 NPAL MENTORING EXAMPLE LAND


TOTAL: \$ 34,200.00

Projected # of children served during the Grant performance period:

Sub-Grant Date Range: 04/01/2019 - 03/31/2020

### Add Personnel Items

Delete Items

Name	Title	Hourly ?	Rate ?	Total Hrs/Wk ?	Grant Hrs/Wk ?	% Time on Grant	Start Date	End Date	Total Salary
<input type="checkbox"/> Jane Doe	Program Coordin	<input checked="" type="checkbox"/>	13.45	40	25	62.50%	4/1/2019	3/31/2020	\$17,581.07
Name	FICA	Medical	Dental	S.T. Disability	L.T. Disability	Life	Other	Total Fringe Benefits	Notes
Jane Doe	1344.95	0	0	0	0	0	0	\$ 0.00	

Add

Personnel

No notes

Update

You must

Click on the '+' under Notes to add the narrative information for each staff member. These notes are for both the personnel and fringe benefits entries. Notes included for each line item should describe the work the employee will be doing related to the NPAL Mentoring program as well as any other relevant/clarifying information that may be needed.

**Notes are required for all line items in this section of the budget.**

**Please note:** If entering an amount for "Other" in the fringe benefits section, you do need to provide information specifically identifying this fringe benefit here.

Amount: \$ 17,581.07

in your reimbursement.



When adding notes, this is the pop up that will appear. Please enter the necessary narrative information and press “Save and Close” to close the screen and return to the budget entry page. Once you have entered and saved the notes, the “+” will change to a speech bubble.

### Notes for Jane Doe

No Notes from National

Save and Close

### Personnel Notes

No notes from National

Update Amounts

Save and Exit

Next

Total Requested Amount: \$ 18,864.70

You must resubmit this budget if changes are made and receive approval on the new budget in order to see these changes reflected in your reimbursement.



## 2019 NPAL MENTORING EXAMPLE LAND

TOTAL: \$ 34,200.00

Projected # of children served during the Grant performance period: 38

Sub-Grant Date Range: 04/01/2019 - 03/31/2020

### Add Personnel Items

Delete Items

	Name	Title	Hourly ?	Rate ?	Total Hrs/Wk ?	Grant Hrs/Wk ?	% Time on Grant	Start Date	End Date	Total Salary
<input type="checkbox"/>	Jane Doe	Program Coordin	<input checked="" type="checkbox"/>	13.45	40	25	62.50%	4/1/2019	3/31/2020	\$17,581.07
<input type="checkbox"/>			<input type="checkbox"/>					4/1/2019	3/31/2020	

Name	FICA	Medical	Dental	S.T. Disability	L.T. Disability	Life	Other	Total Fringe Benefits	Notes
Jane Doe	1344.95	0	0	0	0	0	703.24	\$1,283.63	+
								\$	+

Add

Do not leave any empty items in the "Add" box. The system will try to save it for you and it will show up as an line item with a random string of numbers and letters as its title in your budget. Select these empty line items in the 'Add" box and hit delete **before** saving or moving forward.

### Personnel Notes

No notes from National

Update Amounts

Save and Exit

Next

Total Requested Amount: \$ 18,864.70



## 2019 NPAL MENTORING EXAMPLE LAND

TOTAL: \$ 34,200.00

Projected # of children served during the Grant performance period:

Sub-Grant Date Range: 04/01/2019 - 03/31/2020

### Add Personnel Items

[Delete Items](#)

Name	Title	Hourly ?	Rate ?	Total Hrs/Wk ?	Grant Hrs/Wk ?	% Time on Grant	Start Date	End Date	Total Salary
<input type="checkbox"/> Jane Doe	Program Coordin	<input checked="" type="checkbox"/>	13.45	40	25	62.50%	4/1/2019	3/31/2020	\$17,581.07

Name	Total Fringe Benefits	Notes
Jane Doe	\$ 0.00	+

This notes section is utilized when submitting a request for a budget revision after your budget has been approved. No information should be included here at this time.

[Add](#)

### Personnel Notes

No notes from National

[Update Amounts](#)[Save and Exit](#)[Next](#)

Total Requested Amount: \$ 17,581.07

You must resubmit this budget if changes are made and receive approval on the new budget in order to see these changes reflected in your reimbursement.



## 2019 NPAL MENTORING EXAMPLE LAND

TOTAL: \$ 34,200.00

Projected # of children served during the Grant performance period:

Sub-Grant Date Range: 04/01/2019 - 03/31/2020

### Add Personnel Items

[Delete Items](#)

Name	Title	Hourly ?	Rate ?	Total Hrs/Wk ?	Grant Hrs/Wk ?	% Time on Grant	Start Date	End Date	Total Salary
<input type="checkbox"/> Jane Doe	Program Coordin	<input checked="" type="checkbox"/>	13.45	40	25	62.50%	4/1/2019	3/31/2020	\$17,581.07

Name	FICA	Medical	Dental	S. T. Disability	L. T. Disability	Life	Other	Total Fringe Benefits	Notes
Jane Doe	1344.95	0	0	0	0	0	0	\$ 0.00	+

[Add](#)

Notes from reviewers will appear here. These might include revisions needed if the budget is sent back for adjustments or corrections. During your original budget entry, this will be blank.

[Personnel](#)

No notes from National

[Update Amounts](#)[Save and Exit](#)[Next](#)

Total Requested Amount: \$ 17,581.07

You must resubmit this budget if changes are made and receive approval on the new budget in order to see these changes reflected in your reimbursement.





## 2019 NPAL MENTORING EXAMPLE LAND

TOTAL: \$ 34,200.00

Projected # of children served during the Grant performance period:

Sub-Grant Date Range: 04/01/2019 - 03/31/2020

### Add Personnel Items

Delete Items

Name	Title	Hourly ?	Rate ?	Total Hrs/Wk ?	Grant Hrs/Wk ?	% Time on Grant	Start Date	End Date	Total Salary
<input type="checkbox"/> Jane Doe	Program Coordin	<input checked="" type="checkbox"/>	13.45	40	25	62.50%	4/1/2019	3/31/2020	\$17,581.07
Name									
Jane Doe									

Life	Other	Total Fringe Benefits	Notes
0	703.24	\$ 1,283.63	+

Click here if you need to add another staff person to your budget. You will then repeat the previous steps.

Add

If you need to step away from entering your budget, you may press "Save and Exit" and come back to continue later.

Once you have entered all of the necessary Personnel and Fringe Benefits expenses, press "Next" to move on to the Expenses section of the budget.

Update Amounts

Save and Exit

Next

Total Requested Amount: \$ 18,864.70

You must resubmit this budget if changes are made and receive approval on the new budget in order to see these changes reflected in your reimbursement.

# Personnel

- Include a minimum of 1 Part-time (PT) position for the NPAL Mentoring Program Coordinator
- Position titles should be short, descriptive, and position specific
  - NPAL Mentoring Program Coordinator
  - NPAL Mentoring Program Aid #1
  - NPAL Mentoring Program Aid #2

If you are a returning organization, you may refer to how entries are titled on your current budget for further examples.



# Fringe Benefits

- These benefits are for the personnel listed in the budget category and only for the percentage of time devoted to the project
- Determine which benefits will be claimed (FICA, workers' comp, unemployment, medical, dental, etc.)
- Only fringe specifically listed in the budget may be claimed for reimbursement  
(e.g., if you list health and dental insurance, you may not then also claim vision and life insurance as well on a reimbursement request; if you only list FICA, you may not also claim unemployment and worker's comp)



# Fringe Benefits

- Fringe benefits should not be included if the position is filled by a contracted employee and not a regular employee
- Insurance rates need to be based on employee only premium rates paid by the employer
- Health benefits need to be broken out into their own listings (i.e., Medical, Dental, Vision, etc.)
- An option for 'Other' is available if budgeting for a benefit that is not listed; this will need identified in the notes (i.e., Workers' Comp, SUTA, etc.)



# Line Item Notes

- Line Item Notes are where you will enter the ‘budget narrative’ information
- Narrative information needs to be included in the “Notes” section specific to each line item
- Detailed and/or clarifying information in regard to items listed in your budget is provided here



# Personnel & Fringe Line Item Notes

Include a brief description of the responsibilities and duties, in relationship to fulfilling the program goals and objectives, specific to each person included in the budget.

## **Other information that should also be included in the notes:**

- Clarifications, such as if the CEO is also the actual NPAL Mentoring Program Coordinator
- A comment verifying that all insurance rates are based on employee only premium costs



# Personnel & Fringe Line Item Notes

## Example Notes:

- NPAL Mentoring Program Coordinator will be responsible for recruiting participants, implementing the program, tracking participation, and completing required reporting.
- CPO will fulfill administrative components of the program from the beginning of the LOA and will oversee that all program requirements are being fulfilled. Health and Dental insurance, based on employee only premium rates.



# Adding Other Expenses

- Supplies
- Travel
- Contract Specialists
- Other Costs







## 2019 NPAL MENTORING EXAMPLE LAND

TOTAL: \$ 34,200.00

Sub-Grant Date Range: 04/01/2019 - 03/31/2020

### Add Expense Items

[Delete](#)

Item Name

Category

This is the Expenses page.  
As with Personnel, you  
add items and include  
line item notes. To begin,  
click "Add"

Add

Total Expense ?

Amount Allocated to Grant

Notes

### Expense Notes

No notes from National

### Attachments

Upload Attachments

Previous

Update Amounts

Save and Exit

Submit

Total Requested Amount: \$ 18,864.70



## 2019 NPAL MENTORING EXAMPLE LAND

TOTAL: \$ 34,200.00

Sub-Grant Date Range: 04/01/2019 - 03/31/2020

### Add Expense Items

[Delete](#)

Item Name

Category

Monthly Rate ?

Total Expense ?

Amount Allocated to Grant

Notes



Other Costs

0

0

\$

+

Add

1

Expense

Enter the Item name.

Please use a **short** general descriptive name here.

Ex: Snacks/Field Trip Meals, Office/Program Supplies, End of Year Trip - Admissions, Curriculum, etc.

Additional detailed information will be provided in the Notes.

No notes

Attachm

Upload Attachments

2

Select the budget category:

- Supplies
- Travel
- Contract Specialist
- Other Costs

Previous

Update Amounts

Save and Exit

Submit

Total Requested Amount: \$ 22,567.03



## 2019 NPAL MENTORING EXAMPLE LAND

TOTAL: \$ 34,200.00

Sub-Grant Date Range: 04/01/2019

1 Enter the total dollar cost of the expense as a lump sum.

### Add Expense Items

[Delete](#)

Item Name	Category	Monthly Rate ?	Total Expense ?	Amount Allocated to Grant	Notes
<input type="text"/>	Other Costs ▾	<input type="text" value="0"/>	<input type="text" value="0"/>	\$	<input data-bbox="1798 415 1870 496" type="text" value="+"/>

[Add](#)

### Expense Notes

No notes from National

2

Add notes (narrative information) to explain the item(s) and how it will be used for/related to the NPAL Mentoring program.

### Attachments

[Upload Attachments](#)[Previous](#)[Update Amounts](#)[Save and Exit](#)[Submit](#)

Total Requested Amount: \$ 22,567.03





### Name

☐ Office/Program Supplies

### Monthly Rate ?

0.00

### Total Expense ?

350.00

### Amount Allocated to Grant

\$ 350.00

### Notes



## Add Expense Items

Delete

### Item Name



### Category

Other Costs

### Monthly Rate ?

0

### Total Expense ?

0

### Amount Allocated to Grant

\$

### Notes

+

Add

## Expense Notes

No notes from National

## Attachments

Upload Attachments

Previous

Update Amounts

Save and Exit

Submit

Total Requested Amount: \$ 34,200.00

Do not leave any empty items in the Add box. The system will try to save it for you and it will show up as a line item with a random string of numbers and letters as its title in your budget. Select these empty line items in the Add box and hit delete **before** saving or moving forward.



Name	Monthly Rate ?	Total Expense ?	Amount Allocated to Grant	Notes
<input type="checkbox"/> Office/Program Supplies	<input type="text" value="0.00"/>	<input type="text" value="350.00"/>	<input type="text" value="\$ 350.00"/>	

#### Add Expense Items

Delete

Item Name	Category	Monthly Rate ?	Total Expense ?	Amount Allocated to Grant	Notes
<input type="button" value="Add"/>					

#### Expense Notes

Click "Update Amounts"  
to calculate the amount  
allocated to the grant.

No notes from National

#### Attachments

Upload Attachments

Total Requested Amount: \$ 34,200.00



Sub-Grant Date Range: 04/01/2019 - 03/31/2020

### Add Expense Items

[Delete](#)

Item Name

Category

Monthly Rate ?

Total Expense ?

Amount Allocated to Grant

Notes

Add

This notes section is utilized when submitting a request for a budget revision after your budget has been approved. No information should be included here at this time.

### Expense Notes

No notes from National

### Attachments

Upload Attachments

Previous

Update Amounts

Save and Exit

Submit

Notes from reviewers will appear here. These might include revisions needed if the budget is sent back for adjustment or corrections. During your original budget entry, this will be blank.

Amount: \$ 22,810.56

You must resubmit this budget if changes are made and receive approval on the new budget in order to see these changes reflected in your reimbursement.

# Supplies

- Enter a **brief title** for the line item (**Example:** Office/Program Supplies)
- Supplies include any materials that are expendable or consumed during the course of the program *and* **nonexpendable items under \$500**
- Nonexpendable items, especially items of significant value (over ~\$50), need to be listed in their own individual line items (e.g., t-shirts, printers, digital cameras, etc.)
- Office/Program Supplies, Snacks/Field Trip Meals, Curriculum, etc. each need to be listed as their own line item





# Supply Examples

## Office/Program Supplies:

- Possible supplemental materials needed to implement the curriculum (paper, markers, tri-fold display board, pencils, binders, card stock, etc.)
- Record keeping materials (folders, notebooks, paper, binders, pens, etc.)
- Toner cartridges
- Paper products for serving snacks (paper plates, napkins, cups, etc.)

**Snacks/Field Trip Meals for mentees** (limited to specific occasions)



# Supply Examples

- T-Shirts (not to exceed \$15/shirt) / Hoodies (not to exceed \$25)  
(for safety purposes — easily identifying participants during special events)
- Digital Camera (less than \$150)
- Printer (less than \$150)
- Practice Pinnies/Jerseys (not to exceed \$6/pinnie)



# Supplies

**Reminder:** Items of significant value (~\$50+) will need their own line item for specific approval of that item

**Only** food and beverages may be purchased in a line item designated for Snacks/Field Trip Meals; items such as paper plates, cups, etc. would need to be purchased through a Program/Office Supplies line item.



# Supplies – Item Notes

- Provide information regarding how the supplies will be used to support/enhance the NPAL Mentoring program in the notes
- **Snacks/Field Trip Meals:** Indicate when the snacks will be provided and why they are necessary (i.e., during curriculum lessons, field trips, end of program graduation event, etc.)
- **Please note:** Meals are only allowed with grant funding if the off site event (i.e., enrichment activity trip) is significant in length and will span the mentees' regular meal time
  - specify this in the notes if you are including meal costs
  - meal cost amounts: lunch  $\leq$  \$10/person; supper  $\leq$  \$15/person



# Supplies – Item Notes

- **Office/Program Supplies:** List examples of items you plan to purchase with funds in this line item
- **All Non-expendable items:** List how each item will be used related to the NPAL Mentoring program (remember to include a comment regarding the safety component for t-shirts or hoodies)



# Supplies – Item Notes

## Example Notes

- **Snacks/Field Trip Meals:** Snacks such as chips, juice, crackers, fruit, etc. will be purchased for occasional use during the program time to keep NPAL Mentoring participants engaged, and if the program runs during the normal snack time or dinnertime. Lunch will be provided to NPAL Mentoring participants during trips that will span the mentee's regular lunch time. Lunch costs will not exceed \$10 per person.



# Supplies – Item Notes

## Example Notes

- **Office/Program Supplies:** Items such as pencils, printer ink, copy paper, notepads, etc. as needed to complete the NPAL Mentoring programs and activities.
- **Printer:** Printer will be used to print supplemental program materials for mentees, flyers for mentor recruitment, program communication to parents, etc.
- **Camera:** Camera will be used to take photos of NPAL Mentoring participants for program promotion and reporting.
- **T-Shirts:** T-shirts will be purchased for safety purposes and easily identifying NPAL Mentoring participants during field trips. T-shirts are estimated to be \$9 per shirt for 38 mentees, 5 mentors, 2 extra for mentor/mentee turnover, and 2 staff members totaling in 47 t-shirts.



# Other Costs

- Include expenses such as admission costs for field trips, curriculum, community service project, background checks, etc. in this category
- NPAL Mentoring program funds may be used to cover costs only for current program participants. Admission costs towards field trips to cover both mentees and mentors should be included
- Transportation costs related to the field trips need to be listed in the *Travel* category
- Snack expenses related to field trips need to be included in the *Supplies* category (specifically within the Snacks line item)





# Other Costs - Notes

## Example Notes

- **End of Year Trip - Admissions:** NPAL Mentoring participants will have an opportunity to attend an end of the year event such as Sky Zone, skating, bowling, etc to enhance the bond between mentors and mentees over the program year. Estimated trip for 38 mentees, 5 mentors, and 2 staff to supervise.



# Travel

- Travel should be entered into the budget under the “Travel” category
- Travel can include expenses such as Youth Summit, transportation to purchase supplies/snacks (by organization owned vehicle and/or by personal vehicle), rental vehicles for field trips, etc.
  - Each of these expenses should be included in the budget as their own line item
- Travel by Organization Owned Vehicle and Travel by Personal Vehicle can be included in the budget in one line item



# Travel – Notes

## Personal Vehicle

- Reimbursement will be made via mileage logs not to exceed the current GSA mileage rate (\$0.58/mile).
- The purpose(s), destination(s), number of trips, and approximate round trip mileage of each trip needs to be included in the line item notes.
- *If travel will be by both personal and organization owned vehicle, please specify this information in the line item notes including the estimated miles for each vehicle accordingly.*



# Travel – Notes

## Organization Owned Vehicle

- Reimbursement will be made via **mileage logs and gas receipts**
- The purpose(s), destination(s), number of trips, and approximate round trip mileage of each trip needs to be included in the line item notes
- *If travel will be by both personal and organization owned vehicle, please specify this information in the line item notes including the estimated miles for each vehicle accordingly.*



# Travel – Notes

## Example Notes

- **Personal Vehicle:** The estimated cost of mileage for CEO's car that will be utilized for transportation to purchase snacks and supplies within the community throughout the NPAL Mentoring program year. Estimated at 500 miles at \$0.58/mile
- **Organization Owned Vehicle:** The cost of gas for a PAL van that will be utilized for transportation to purchase snacks and supplies within the community throughout the NPAL Mentoring program year. Estimated at 500 miles overall
- **Personal & Organization Owned Vehicle:** The estimated cost of mileage for CEO's car that will be utilized for transportation to purchase snacks/supplies estimated at 450 miles at \$0.58/mile, and the estimated cost for gas to transport PAL participants to the end of the year field trip at 50 miles



# Travel

- The NPAL Mentoring Youth Summit is expected to be held at the Bolger Center in late July
- All expenses towards the Youth Summit should be included in the budget under one line item



# Travel

**The following travel costs for attending Youth Summit could be included in your budget if applicable**

- Airfare/Train-fare/Mileage
- Baggage fees
- Hotel
- Airport Parking
- Per Diem
- Local Ground Transportation (R/T airport – home & in Potomac, MD)
  - Mileage
  - Taxi/Uber/Lyft/shuttle
  - Rental Vehicle



# Travel - Notes

## Example Notes

- Estimated costs for 5 youth and 1 chaperone for the NPAL Mentoring Youth Summit, including the cost of airfare, shuttle transportation from the airport to the hotel and back, summit fees, and per diem





# Contract Specialists

- Include consultants, guest speakers, etc.
- Consultant fees may not exceed \$650.00 for an 8-hour day (\$81.25/hour)



# Contract Specialists - Notes

Provide detailed information regarding what the contract specialist will be doing and how their services support/enhance the NPAL Mentoring program in the notes

**Example Notes:** Arrangements will be made for a contractor to assist with the processing and submission of reimbursement requests, and meeting the financial requirements of the NPAL Mentoring program



# **Uploading Supporting Documentation**



☐ Youth Summit

0.00

4650.00

\$ 4,650.00



### Add Expense Items

[Delete](#)

Item Name

Notes

[Add](#)

**Reminder:** Supporting documentation verifying fringe rate(s) must be uploaded to the budget for percentage based fringe, with the exception of FICA.  
(ex: Worker's Compensation, SUTA, etc.)

Expense Notes

No notes from National

### Attachments

Click "Upload Attachment" to add a document to the budget.

[Upload Attachments](#)[Previous](#)[Update Amounts](#)[Save and Exit](#)[Submit](#)

Total Requested Amount: \$ 34,200.00

You must resubmit this budget if changes are made and receive approval on the new budget in order to see these changes reflected in your reimbursement.



☐ Youth Summit

0.00

4650.00

\$ 4,650.00



### Add Expense Items

Item Name

Category

Monthly Rate ?

Total Expense

Add

### Expense Notes

No notes from National

### Attachments

Upload Attachments

#### Upload New Attachment

File Name:

Browse...

No file selected.

File size is limited to 5mb. Please upload PDF's ONLY.

Upload

1

If you would like to rename the file for the upload, type in the new name here. Otherwise it will have the same as the file that is uploaded.

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

2

Click "Browse" to select the file to upload. The file must be a pdf.

3

Once you have selected the file, make sure you click "Upload."

Previous

Update Amounts

Save and Exit

Submit

Total Requested Amount: \$ 34,200.00

You must resubmit this budget if changes are made and receive approval on the new budget in order to see these changes reflected in your reimbursement.



Youth Summit

0.00

4650.00

\$ 4,650.00



### Add Expense Items

Delete

Item Name

Category

Monthly Rate ?

Notes

Add

### Upload New Attachment

Attachment uploaded successfully. Click "Choose File" to upload another attachment, or "Close" if you are finished.

File Name:

Browse...

No file selected.

File size is limited to 5mb. Please upload PDF's ONLY.

Upload

When you are done, click "Close."

Close

If you upload another file at this point, it will come under the same document type (e.g., Worker's Comp, SUTA, etc.) as the file that was just uploaded. To upload a document of a different type, you will need to click Close and then Upload Attachment again.

Total Requested Amount: \$ 34,200.00

You must resubmit this budget if changes are made and receive approval on the new budget in order to see these changes reflected in your reimbursement.

☐ Youth Summit

### Add Expense Items

[Delete](#)

Item Name	Category	Monthly Rate ?	Total Expense ?	Amount Allocated to Grant	Notes
<div>Add</div>					

### Expense Notes

To view an uploaded file, click on the link for the document under "Attachment(s)."

No notes from National

### Attachments

SUTA 2019.pdf

**Please note:** If you need to delete an attachment (e.g., uploaded the incorrect document), please contact a NPAL Mentoring finance team member at FirstPic for assistance.

,200.00

You must resubmit this budget if changes are made and receive approval on the new budget in order to see these changes reflected in your reimbursement.

☐ Youth Summit

\$ 4,650.00



### Add Expense Items

[Delete](#)

Item Name

Category

Monthly Rate ?

Total Expense ?

Amount Allocated to Grant

Notes

[Add](#)

### Expense Notes

No notes from National

### Attachments

SUTA 2019.pdf

[Upload Attachments](#)

Once you have everything entered the way you want, you must hit this “Submit” button to complete the process and submit your budget for review.

[Previous](#)[Update Amounts](#)[Save and Exit](#)[Submit](#)

Total Requested Amount: \$ 34,200.00

You must resubmit this budget if changes are made and receive approval on the new budget in order to see these changes reflected in your reimbursement.



# Finance & Reimbursement Contact Information

Phone: Eastern Time  
(704) 492-0358

Angie Caffee - [acaffee@nationalpal.org](mailto:acaffee@nationalpal.org)



Phone: Eastern Time  
(443) 302-2080 (office)



- David Cook – (667) 307-4452 (direct line) [dcook@firstpic.org](mailto:dcook@firstpic.org)
- Aji Bakare – (667) 307-4451 (direct line) [abakare@firstpic.org](mailto:abakare@firstpic.org)
- Matthew Bieler (667) 307-4443 (direct line) [mbieler@firstpic.org](mailto:mbieler@firstpic.org)

