

OREGON WATERSHED ENHANCEMENT BOARD

SMALL GRANT PROGRAM BILLING INFORMATION for FISCAL AGENTS

The following information is provided to help speed up your grant payments. OWEB procedures, rules, and forms must be followed or used for payments to be received without delay. All forms are available on the OWEB web page at: http://www.oregon.gov/OWEB/GRANTS/smgrant_forms.shtml. Grantees may use their own spreadsheet formats to track expenses, however expenses must be tracked individually and grouped by budget categories per the application budget.

New OWEB On-Line Grant Management System: <http://apps2.wrd.state.or.us/apps/oweb/fiscal/login.aspx> - Web site can be used to review grant status, payments, report due dates, amendments, etc.

OWEB payment/billing forms provided to Fiscal Agent:

1. Small Grant Request for Release of Funds (page 3)
2. Matching Funds Forms (page 4 & 5)
3. Tax ID Form (page 6) as of 10-01-07 REQUIRED ONLY if new payee or if mailing address or Tax ID # has changed, see instructions on page
4. Budget Amendment Request (page 8)

The most common delays for payments are:

1. Missing forms (Secured Match (1st payment), Actual Match (final payment).
2. Receipts with spreadsheet to cover previous payments are not adequate.
3. Request for Release of Funds form is not signed.
4. Permits, licenses, or other agreements, if required by the grant, are not submitted to OWEB prior to or with First Request for Release of Funds.

Fiscal administration may not exceed 10% of the total Board funds expended for the grant, and must be directly related to the Small Grant project for which reimbursement is being requested. Administration funds are not intended for the Grantee's overall operating expenses.

OWEB will not reimburse project expenses incurred prior to the effective date of the grant agreement. The grant agreement is effective upon signature of all parties.

First Payment Request

The first payment may consist of either:

- An advance of up to 60 percent of the Small Grant award upon presentation of a detailed estimate of expenses for a specified time period. Receipts and invoices are not required at this stage. However, receipts **for the full advance amount are due within 120 days of the date OWEB issues the check.**
- Or of a reimbursement of expenses to date upon presentation of receipts and invoices.

For an advance, the following are required before payment can be made:

- Completed Land Use Form
- Copies of permits, licenses, or other agreements, if required
- Secured Match Form, with signatures from authorized representatives
- Completed FIRST Request column of the Request for Release of Funds Form (use line item categories from the budget page of the application). Funds for the Year 2 Status Report may not be requested with the advance. If fiscal administration is being sought, the charge to OWEB may not exceed 10% of the total amount being requested in the first payment.

Make copies, as appropriate, for your project file. Send the entire package to the OWEB Small Grant Project Manager listed on page 3 of the Grant Agreement.

Final Payment Request

The Final Payment Request should reflect the actual project costs. Grantees may skip the first payment request and make just one final payment request. However, they will still need to furnish all the documentation required for the First Payment Request, described above. With the Final Payment Request, you must secure from the grantee:

- Copies of all invoices and receipts associated with the project. **Invoices may not pre-date the project start date.**
- Project Completion Report, complete with color photos
- Actual Match form
- Oregon Watershed Restoration Reporting form (use the most current from the OWEB web site: <http://egov.oregon.gov/OWEB/forms.shtml>).

Then, you need to:

- Tally the invoices and receipts, and develop a spreadsheet based on project expenses (see sample, p. 8). Verify that the final amount being requested does not exceed the amount awarded (shown in the grant agreement).
 - **Invoices and receipts** must be legible. Dates, amounts and descriptions must be clearly readable. No purchase orders, statements, or credit card statements allowed without actual invoices attached.
 - **Payroll / benefits and administration** must be billed on grantee letterhead (See examples on Pages 9 & 10), and must show: (1) dates for which expenses were incurred, (2) position and name of person being paid, (3) amounts and; (4) signature of authorized grantee or fiscal agent. Expenditures billed in this manner are still subject to audit, so actual receipts, invoices, and records should be kept in your files to back-up expenditures billed to OWEB.
 - **Travel** must be broken down by **individual dates, from/to destinations, and the total number of miles per trip must be shown for reimbursement. The Small Grant Program will not reimburse for meals, lodging, or for out-of-state travel expenses (see p. 7 for details).** For the latest travel rates, go to <http://egov.oregon.gov/OWEB/forms.shtml>.
- Complete all three columns of the Request for Release of Funds based on the furnished invoices and receipts
 - Repeat columns 1 and 2 from the first payment request.
 - If funds are being requested for the Year-Two Status Report, consult the application budget for the allowed amount and create a new line item for this and fill in the amount in column 3.
 - Check to see that the totals for columns 2 and 3 do not exceed the OWEB award amount shown on page one of the grant agreement, and that the Fiscal Administration fee for columns 2 and 3 does not exceed 10% of the *actual amount spent*.

Sign the payment request form. Make copies, as appropriate for your project file. Send the entire package to the OWEB Small Grant Project Manager listed on page 3 of the Grant Agreement.

Budget Amendments

Actual expenses do not need to mirror line item amounts in the original application. However, if Project Management has increased more than 10%, or if the grantee wishes to add line items that did not appear in the original budget, then you need to submit to the Project Manager for the Board a Budget Amendment Request (page 7).

Questions? Call your Small Grant Project Manager (503) 986-0187 or the Grant Payment

Coordinator at (503)986-0177. If you know a problem exists, or if a change to the terms of the grant needs to be executed, please contact us immediately!

SMALL GRANT PROGRAM REQUEST FOR RELEASE OF FUNDS

Grantee Name: _____

Grantee's Fiscal Agent: _____

Project #: _____ Project Name: _____

➤ **First Payment Request:** Submit the Land Use, Secured Match (if not already submitted with the application), and other forms, as required. The first request may be either a 120-day *advance* of up to 60% of the Small Grant award, or a *reimbursement* of expenses to date upon presentation of receipts and invoices (with a 10% holdback until project completion). If the payment is an advance, **receipts for the full advance amount are due to OWEB within 120 days of the date OWEB issues the check.**

➤ **Final Payment Request:** All receipts/invoices and a spreadsheet must be attached along with the Project Completion Report (with color photos and captions) and the most current Restoration Reporting Form.

<u>Project Expenses (refer to application budget)</u>	<u>FIRST Request</u>	<u>FINAL Request</u>
1. <u>Project Management*</u>	\$ _____	\$ _____
2. <u>Travel</u>	\$ _____	\$ _____
3. <u>Contracted Services</u>	\$ _____	\$ _____
4. <u>Supplies and Materials</u>	\$ _____	\$ _____
5. <u>Equipment</u>	\$ _____	\$ _____
6. <u>Pre-Implementation</u>	\$ _____	\$ _____
7. <u>Other*:</u>	\$ _____	\$ _____
8. <u>Other*:</u>	\$ _____	\$ _____
9. <u>Fiscal Admin (not to exceed 10% of 1-8, above)</u>	\$ _____	\$ _____
10. <u>Year-Two Status Report (not to exceed \$200)</u>	\$ <u>FINAL ONLY</u>	\$ _____
TOTALS	\$ _____	\$ _____

* Requires a Budget Amendment Request if different from, or in addition to, line items in the original application budget.

I declare, to the best of my knowledge, that this statement is true, correct and complete.

Fiscal Agent Signature: _____ Organization: _____

Fiscal Agent Name (Please print/type): _____ Date: _____

Phone Number: (____) _____ E-mail Address: _____

Forward This Request to OWEB's Small Grant Project Manager

All checks will be made payable to Grantee's Fiscal Agent. Grantee and Fiscal Agent are responsible for paying vendors directly with funds received for this project.

OWEB APPROVAL

I find this request to be consistent with the Grant Agreement and all funding conditions have been met.

OWEB Project Manager: _____ Date: _____

SMALL GRANT PROGRAM

SECURED MATCH FORM

This form, with signatures, may either be submitted with the project application or with the first payment request. Evidence of match (this form) must be submitted to OWEB before funds will be released.

Project #: _____

Project Name: _____

Applicant/Grantee Name: _____

MATCHING FUNDS

OWEB requires evidence of at least 25% (of the requested OWEB funds) match funding for small grant projects (the Small Grant Team may require a greater amount of match). Evidence entails listing the match funding source and including a signature of commitment from the entity(ies) providing the match. Matching funds may come from other grants, cash donations, donated labor or services, and donated supplies or materials. **OWEB funds and OWEB funds for council support may not be used to satisfy the match requirement.**

Match Funding Source	Signature of Authorized Representative	Dollar Value	Date
Total			

SMALL GRANT PROGRAM ACTUAL MATCH FORM

(Must be completed to receive final project payment)

Grantee Name: _____ Project #: _____

Project Name: _____

OWEB Award Amount: \$ _____ Amount of OWEB Grant Spent: \$ _____

ACTUAL MATCHING FUNDS

In the table below, list ALL matching funds actually received for the above-mentioned Small Grant project. Matching funds may come from other grants, cash donations, donated labor or services, and donated supplies or materials. The total shown must be at least 25% of the OWEB amount ultimately spent on the Small Grant project (a Small Grant Team may require a greater amount of match). **Other OWEB grants may not be used to satisfy the match requirement.**

Match Funding Source	Cash	In-Kind Dollar Value	Date
TOTAL			

State of Oregon
Oregon Watershed Enhancement Board
775 Summer Street NE – Suite 360
S State of Oregon

Oregon Watershed Enhancement Board
775 Summer Street NE – Suite 360
Salem, Oregon 97301-1290

PROJECT # _____

“DO NOT MAIL THIS FORM – FAX ONLY TO 503-986-0199-ATTN: FISCAL”.

The Oregon Identity Theft Protection Act has been passed in order to protect personal information. To comply with this law, OWEB will only require this form; (a) if you are a new Payee not currently listed in the State of Oregon payment system; (b) your mailing address has changed or (c) your Tax ID number and Entity Status has changed.

This form must be filled out by the person or entity receiving payment.

REF: Taxpayer I.D. Number

Federal Law requires us to have your social security number or federal employer identification number on file in order to file form 1099 Misc. at the end of the year. If you do not supply us with this information, your payments may be subject to a 20% withholding.

In order to update our records and validate our reports, and to prevent needless withholding of taxes, please provide the following information for your organization.

<u>CORRECT NAME AND ADDRESS:</u> _____ _____ _____		
<u>INDIVIDUAL:</u> ()	<u>PARTNERSHIP:</u> ()	<u>CORPORATION:</u> ()
<u>501(c)3:</u> ()	<u>GOVERNMENT:</u> ()	<u>NON-PROFIT:</u> ()
<u>SOCIAL SECURITY NUMBER:</u>	____ _ -- ____ _	
OR		
<u>FEDERAL IDENTIFICATION NUMBER:</u>	____ _ -- ____ _	
<u>AUTHORIZED SIGNATURE:</u>	_____	
<u>PRINT OR TYPE NAME AND TITLE:</u>	_____	
<u>TELEPHONE NUMBER:</u>	(_____) --	_____
<u>FAX NUMBER:</u>	(_____) --	_____

If you have any questions, please contact Randy Emch at (503) 986-0184 or Leilani Sullivan at (503) 986-0183. Thank you for your cooperation.

SMALL GRANT PROGRAM

TRAVEL EXPENSES

Travel expenses will be reimbursed only in accordance with rates approved by the Department of Administrative Services and which are in effect at the time the expense was incurred. The current approved rates for reimbursement of travel expenses may be found at:

<http://www.oregon.gov/OWEB/forms.shtml>

The rates are subject to change and govern reimbursement of any travel expenses incurred after the date of the change. Rates are updated periodically. The reason or purpose for all travel expense reimbursement requests must be identified.

The Small Grant Program will reimburse for mileage for travel in a private automobile, while the Grantee/Contractor/Volunteer is acting within the course and scope of his/her duties under the Small Grant and driving over the most direct and usually traveled route.

To qualify for mileage reimbursement, the Grantee/Contractor/Volunteer must hold a valid, current driver's license for the class of vehicle to be driven and carry personal automobile liability insurance in the amounts not less than those required (i) the Oregon Financial Responsibility Law (ORS 806.060) or (ii) the jurisdiction in which the vehicle is being operated, whichever is greater. No mileage reimbursement will be paid for the use of motorcycles or mopeds.

Individual dates, from/to destinations, and the total number of miles per trip must be shown for reimbursement.

The Small Grant Program will not reimburse for meals, lodging, or for out-of-state travel expenses.

Sample Spreadsheet for Tracking Receipts and Invoices

Rainbow SWCD

Actual Expenditure Tracking Sheet for #29-08-017

Jan 01 to June 30, 2008

Date	Vendor Name	Invoice Number	Project Manager	Travel	Fencing Labor	Fencing Materials	Tree Planting	Contract Services	Admin	TOTALS
			600	100	1,495	1,950	350	3,000	899	8,384
01 to 03-31-04	Rainbow SWCD	letterhead							330	330
01 to 03-31-04	Rainbow SWCD	P/R sheet	400							400
01 to 03-31-04	John Doe	Travel Log		52						52
1/15/04	ABC Fencing	4489			600	1,200				1,800
2/14/04	Johnson Construction	1155						3,000		3,000
2/16/04	ABC Fencing	6112			425					425
2/18/04	Apple Tree Planting Inc.	1402					200			200
04-01 to 04-30-04	John Doe	Travel Log		30						30
4/5/04	ABC Fencing	7014			235					235
4/6/04	Apple Tree Planting Inc.	1501					150			150
04-01 to 04-30-04	Rainbow SWCD	letterhead							335	335
04-01 to 04-30-04	Rainbow SWCD	P/R sheet	100							100
5/9/04	ABC Fencing				235	750				985
05-01 to 06-30-04	Rainbow SWCD	letterhead							234	234
05-01 to 06-30-04	Rainbow SWCD	P/R sheet	100							100
05-01 to 06-30-04	John Doe	Travel Log		18						18
										0.00
										0.00
		TOTALS	600	100	1,495	1,950	350	3,000	899	8,384

SMALL GRANT BUDGET AMENDMENT FORM

NOTE: This form only needs to be submitted if you are making changes to Project Management, or adding new line items that did not appear in the original budget.

JUSTIFICATION FOR CHANGE: You may submit the form by email. Attach it to a written justification for the requested budget change. The Small Grant Manager can review and approve the request by return e-mail. If submitted by regular mail, your signature is required below. If you are the grantee requesting the budget amendment, be sure to copy your project's fiscal agent.

Column A OWEB Grant Budget Categories (from the application budget)	Column B OWEB Budget	Column C Change #1	Column D Change #2	Column E Revised OWEB Budget
Project Management	\$0.00	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00	\$0.00
Contracted Services	\$0.00	\$0.00	\$0.00	\$0.00
Supplies and Materials	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Pre-Implementation	\$0.00	\$0.00	\$0.00	\$0.00
Fiscal Agent	\$0.00	\$0.00	\$0.00	\$0.00
Year 2 Status Report	\$0.00	\$0.00	\$0.00	\$0.00
GRANT TOTAL	\$0.00	\$0.00	\$0.00	\$0.00

Grantee Signature _____

Date _____

OWEB Small Grant Approval _____

Date _____

INSTRUCTIONS (Please read!):

- Columns A and B:** Reproduce each budget category (Column A) and budget amount (Column B) exactly as they appear in the OWEB column of the approved application. All Budget Categories (original and proposed) must be shown, even when the categories are adjusted to \$0.00.
- Columns C and D:** In Column C, show only proposed changes to Project Management or budget additions for new line items. Enter decreases as a negative number, e.g., -150.00. If, at a later date, you need to request an additional budget change, use Column D. DO NOT make changes to the numbers you entered previously in Column C.

When entering numbers in Columns C and D, the Grant Totals should always automatically calculate to \$0.00. DO NOT enter any numbers in the Grant Total row for Columns C and D.

- Column E:** DO NOT enter any numbers in this column; totals are automatically calculated across columns for these rows.

After you have completed the form, check to see that the Grant Totals in Columns A and E both equal the original award amount.

File:Excel/F:/user/oweb/forms/small grant budget amendments.xls

**Sample Documentation of Fiscal Administration Expenses
(To Be Submitted on Letterhead)**

April 10, 2008

To: OWEB
 775 Summer Street NE Suite 360
 Salem, OR 97301-1290

From: Rainbow SWCD
 PO Box 111
 Salem, OR 97225

Small Grant Number: 29-05-017

Fiscal Administration expenses paid for the period 01-01-04 to 03-31-04 are as follows:

January 08	\$ 50.00
February 08	50.00
March 08	50.00
Total Fiscal Administration	 \$150.00

Authorized Grantee Signature

Date

**Sample Documentation of Payroll Expenses
(To Be Submitted on Letterhead)**

April 01, 2008

To: OWEB
775 Summer Street NE Suite 360
Salem, OR 97301-1290

From: Rainbow SWCD
PO Box 111
Salem, OR 97225

Grant Number 29-09-017

Name: John Doe
Dates: 01-01-08 to 03-31-08
Position Description: Project Manager

January 08	\$150.00
February 08	150.00
March 08	150.00
Total Payroll Expenses	\$450.00

Authorized Grantee Signature

Date

NOTE: Payroll expenses are gross wages, payroll taxes, health insurance, retirement benefits, accrued leave liability, and workers compensation insurance.