Miscellaneous Federal Grant (MFG) Utilization Report Instructions

- 1) **Date** Enter the current date.
- 2) Grant ID Enter specific grant or sub-grant number for AASIS
- 3) **Legislative Review Date** Leave blank. The date will be entered by DFA Office of Budget after the MFG is reviewed by Legislative Council.
- 4) **Agency** Enter the name of the agency requesting the MFG.
- 5) **Program Title** Enter the name of the program.
- 6) **Granting Organization** Enter the name of the federal or state agency which is the source of the grant funds.
- 7) **Grant** # Enter the specific grant number assigned by the federal or state granting agency.
- 8) **Effective Date of Authorization** Enter the beginning and ending dates for the program or the period for which personnel are being authorized in accordance with the State fiscal year. An appropriation cannot extend beyond June 30 of any fiscal year.
- 9) Purpose of Grant / Reason for Addition or Change Enter a thorough description of the grant and its purpose, or describe the purpose of any addition or change being submitted. Submit any other pertinent information as may be needed to justify a request. If Information Technology (IT) related items are included in the request, the agency must include the location (major agency application, support or project) and location number in the agency's IT Plan referencing the requested item (example major application #2).
- 10) Project Grant Funding:

Business Area Code – Enter the four-digit code of the agency.

Funds Center Code – Enter the existing appropriation code if new funding is a modification of an existing grant or if the agency will deposit and expend this new federal funding from an existing federal appropriation. If the MFG is for a new grant which will require a new appropriation, leave blank - the new funds center code will be added by DFA-Office of Budget after it is established by DFA-Office of Accounting.

Fund Code - If an expansion of an existing grant, enter the seven-digit fund code. If a new fund must be established, leave blank. The agency must complete a Fund Request form and submit it to DFA-Office of Budget along with the MFG. The new fund code will be entered by DFA-Office of Budget after it is established by DFA-Office of Accounting. Only funds deposited in the State Treasury are eligible for Miscellaneous Federal Grant Program Appropriation.

Functional Area Code – Enter the functional area of the agency.

Continuation of Existing Program, Change in Existing Program or New Program - Enter an "X" on the appropriate line. A "continuation of existing program" is for grants previously established for which a time extension or balance of appropriation for the new fiscal year is being requested. The amount of appropriation requested can not exceed the previous MFG. A "change in existing program" is an increase or change to a previously approved grant award established with a MFG. A "new program" is one for which MFG appropriation has not previously been awarded to an agency under the grant award.

- 11) **New Federal Funds** Enter the requested appropriation for the federal funds by line item. (Note: there is a line item specifically designated for the American Recovery and Reinvestment Act of 2009 (ARRA); no other line item can be used when requesting appropriation to spend ARRA funds.)
 - **State Matching Funds** If the grant is not 100% federal, enter the required state matching amount by line item. State matching appropriation is not provided through the MFG process.
 - **Other Matching Funds** If the grant requires matching funds other than state matching, enter the required amount by line item. This is usually local matching from cities and/or counties. Other matching appropriation is not provided through the MFG process.
 - **Project Total** Total of federal, state and other columns by line item.
- 12) **Funding Percentages** Enter the current and anticipated federal, state and other funding ratio percentages for the program for which appropriation is being requested. This section must be completed or the request **will not** be approved.
- 13) **Type of Federal Grant** Enter an "X" on the appropriate line to indicate the type federal grant being requested. **WIA** Workforce Investment Act would be for funds provided pursuant to Public Law 105-220. **Non-WIA** would be for all other federal funding except for funds received from the American Recovery and Reinvestment Act of 2009. **ARRA** American Recovery and Reinvestment Act of 2009 would be for all one-time additional federal funding received from this Law. (Note: In Section 11 of this form there is a line item specifically designated for ARRA; no other line item can be used when requesting appropriation to spend ARRA funds.)
- 14) **Anticipated Duration of Federal Funds** Enter a date or statement as to the anticipated duration of the federal funds for the program.

15) **Positions to be established** – Enter information only if new positions are to be established, or if the Utilization Report pertains to a continuation of positions authorized in the preceding fiscal year. Each position must be entered separately.

Personnel Area - Enter the four-digit personnel area designation to which each authorized position will be charged.

Position Number - Leave blank if a new position(s), DFA-Office of Personnel Management will enter the assigned number. If the request is a continuation of positions authorized in the preceding fiscal year, enter the AASIS eight-digit assigned number.

Cost Center - Enter the six-digit cost center for the agency to which each authorized position will be charged.

Commitment Item – Enter the six-digit commitment item for Regular Salaries (501:00:00) or Extra Help (501:00:01), whichever is applicable.

Position Title – For each position being established, enter the existing Position Title as authorized in A.C.A. §21-5-208.

Class Code - For each position being established, enter the Class Code corresponding to the Position Title as authorized in A.C.A. §21-5-208.

Grade - For each position being established, enter the Grade corresponding to the Position Title and Class Code as authorized in A.C.A. §21-5-208.

Line Item Maximum – For each unclassified position being established enter a line item maximum salary rate set out in dollars. These positions must be grade 66 or 99.

- 16) **Agency Director** Obtain the signature of the Agency Director and submit the form and all attachments to DFA Office of Budget.
- 17) **Office of Budget** After the Budget Analyst assigned to the agency reviews the request, the form is submitted to the DFA Budget Administrator for signature.
- 18) **Office of Personnel Mgmt** Following the approval of the DFA Budget Administrator, if positions are requested, the MFG is submitted by DFA-Office of Budget to the DFA Personnel Administrator for signature.
- 19) **DFA IGS State Technology Planning Approval** DFA IGS State Technology Planning's signature will be obtained, by DFA-Office of Budget, to signify the review and approval of any action requested by applicable state agencies for the purpose of purchasing information technology related items in accordance with applicable Technology Plans previously submitted to DFA IGS State Technology Planning by the requesting agency(s). Constitutional Offices, Institutions of Higher Education and Legislative/Judicial agencies are exempt from this process.

The requesting agency must attach a copy of a timely grant award from the Federal Granting Agency authorizing the new positions and/or appropriation to the MFG request form or the request will not be approved.

UTILIZATION REPORT

FOR MISCELLANEOUS FEDERAL GRANT PROGRAM APPROPRIATION AND PERSONNEL AUTHORIZATION REQUEST A.C.A. §19-7-501 ET SEQ.

Date:	(1)		Grant ID:	(2)	Legislative Review Date: (3)					
Agency:		4			Program Title:		J	5		
	Organization:		(6))			Grant #:		7	
	Date of Authorization	on: (8)	Beginning:			F	- Ending:			
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Approved	by: 16			(17)				(18	3)	
Agency Director		Date	Offic	_	Office of Personnel Mgmt Date					

UTILIZATION REPORT

FOR

MISCELLANEOUS FEDERAL GRANT PROGRAM APPROPRIATION AND PERSONNEL AUTHORIZATION REQUEST A.C.A. §19-7-501 ET SEQ.

Date:		Grant ID					Legislative Review Date:					
Agency:					Progra	am Title:						
Granting C	ting Organization: Grant #:											
_	Pate of Authorizatio	n:	Beginning:									
			addition or change: (include attachments as necessary to provide									
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Conference & Travel Expense									-			
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Approved	by:											

Agency Director

Date

Office of Budget

Date

Date

Office of Personnel Mgmt