## REIMBURSEMENT REQUEST PROCEDURES

# **Purpose**

The Combined Reimbursement form, in Excel, combines grant forms into three tabs — Invoice, Financial Status Report (FSR), and Salary/Match Detail Report. Use Grant Administration Division (GAD) approved forms only. Complete all forms using the instructions below and your OAG approved detailed budget as a guide.

## **Reimbursement Process**

Complete each of the three tabs on the Combined Reimbursement form and mail to the address on the Invoice form to be reimbursed for grant related expenses. **Do not** submit the Combined Reimbursement form electronically.

### **Due Date and Reimbursement Requirements**

The Invoice and the two supporting monthly reports — the FSR and Salary/Match Detail Report on the Combined Reimbursement form must be **received by GAD no later than** 20 calendar days after the end of the month being reported. For example, February 20 is the deadline for GAD to receive the January 2009 invoice and reports. **Even if you had no grant expenses and/or activity for a given month, you must submit the Invoice showing \$0** and the monthly reports showing zero activity to satisfy the reporting requirement.

No Invoice will be paid by the OAG without the two accompanying monthly reports attached. Print the reports and attach to the Invoice.

### INVOICE INSTRUCTIONS

Complete all items using the agency name and contract number listed on the OAG Grant Contract.

- **Invoice Number**: If your agency has an invoice numbering system, include an assigned number in this space (Optional).
- **Date:** Enter the date the Invoice is mailed, use the format mm-yyyy.
- **Texas TIN:** The 14-digit number issued by the State of Texas Comptroller's Office or any direct deposit 14-digit number the organization may have with any state agency. Please use the number for electronic deposit with the State. Direct deposit forms are available from the OAG or download the form at: <a href="http://www.window.state.tx.us/taxinfo/taxforms/74-158.pdf">http://www.window.state.tx.us/taxinfo/taxforms/74-158.pdf</a>
- **Contact Person's Information**: All contact information of the person *preparing* the form must be included. The signatory of the Invoice and Financial Status Report <u>cannot</u> be the same person who prepared the form.
- **Date of Service:** Enter month and year the expenditures were paid for services delivered, use the format mm-yyyy.
- **Amount of Claim:** Enter the total grant expenditures paid for the date of services listed. The total amount should match the Financial Status Report total for the month.
- **Signature of Authorized Official**: Authorized Official is the individual given the authority to sign all grant adjustment requests, inventory reports, progress reports and financial reports or any other official documents related to the grant on behalf of the grantee.
  - o To designate another person to sign the Invoice and FSR, please submit a request on agency letterhead signed by the Authorized Official.

# FINANCIAL STATUS REPORT (FSR) INSTRUCTIONS

The FSR is the supporting documentation to the Invoice Form. The OAG Accounting Division will not pay any Invoice without the attached FSR. The FSR will also be used as a quarterly and end-of-year financial report. Complete all information to ensure prompt payment:

- Columns by Month: Enter the ACTUAL expenditures charged to this grant/project for the month being reported.
  - o Total monthly expenditures must equal the amount reported in the Amount of Claim box on the Invoice.
  - o The FSR auto-calculates cumulative totals and remaining balances. These percentages and totals may be useful as a management tool.
  - Note: The 10% of your Total FY 2009 Approved Budget auto-calculates. This amount will be helpful if you need to adjust your grant. See the Original Contract Budget column.
  - o Important Information changes after a given month has been reimbursed are prohibited. The FSR is a record of reimbursement, and must reflect actual dollars paid. Contact the Grant Manager if any corrections to the FSR are necessary.
- Budget Adjustment or 10% Budget Modification Section: Includes (1) Original Contract Budget, (2) Increase or Decrease, and (3) FY 2009 Operating Budget columns.
  - o <u>Original Contract Budget</u> is the grant award amount approved by the OAG. This column is completed by the OAG and is password protected.
  - o <u>Increase or Decrease</u> this column will reflect any budget adjustment(s) or 10% modification(s) during the year. Once the OAG approves your organization's request, please make changes in this column.
  - o <u>FY 2009 Operating Budget</u> is the difference between the Original Contract Budget column and the Increase or Decrease column. The amount from this column is transferred to the FY 2009 Approved Budget found on the left side of the FSR next to the Budget Category column.

**Preparer's Comments**: Use this section to communicate relevant information related to a significant expense during any given month. The preparer must also enter comments explaining any negative balances and indicate how and when they will be corrected.

#### SALARY AND MATCH DETAIL REPORT INSTRUCTIONS

The Salary and Match Detail Report is the monthly supporting documentation to the FSR. The OAG Accounting Division will not pay any Invoice without the attached Salary and Match Detail Report. Please fill in all fields, including name, contract number, etc.

- **Date of Service:** Enter month and year the expenditures were paid for services delivered use this format mm-yyyy.
- Salary Detail: Enter a "Y" to indicate the position is currently filled or "N" if the position is vacant. Hours worked on the grant should match the number of hours reflected on the employee(s) time sheet. Enter the amount requested for reimbursement for each position. The total amount requested must equal the amount of salary requested in the FSR for the date of service. All expenditures reported for salary must meet Office of Management and Budget (OMB) and Uniform Grant Management Standard (UGMS) cost principles.

• Match Detail: If required for your grant, enter the title of the line item expenditure(s) and the amount(s) for the month of service. The total amount requested must equal the amount of Actual Monthly Match reported in the FSR. All expenditures reported for match must meet OMB and UGMS cost principles.

## INVOICE, FSR, SALARY AND GRANTEE MATCH, REPORT SUBMISSION

### **Number of Copies**

Prepare an original for the OAG and retain one copy for your financial records. Only forms with an <u>original</u> signature can be paid, do not send copies. **Faxed and e-mailed forms will NOT be accepted,** unless specifically requested by the OAG.

### Retention

Detailed supporting documentation for this form must be kept for four years or longer in accordance with the UGMS. Detailed supporting documentation includes but is not limited to: timesheets, payroll records, travel invoices, contractual invoices. All must be available upon request of the OAG or OAG's designee.

## **Transmittal**

The Invoice, FSR and Salary/Match Detail Report must be mailed to:

Office of the Attorney General Grants Administration Division – MC 005 P.O. Box 12548 Austin, TX 78711-2548

# **Corrections/Questions**

If you have any questions, or discover an error after sending in the reimbursement request, immediately contact your grant manager or one of us for assistance.

For Crime Victim Services and Criminal Justice grantees the financial contacts are:

Zulay Sanchez Financial Manager (512) 936-1688 zulay.sanchez@oag.state.tx.us Natha Caldwell Financial Specialist (512) 936-2936

natha.caldwell@oag.state.tx.us