

## Florida Resilient Coastlines Program Grants Reimbursement Webinar

### Angel Baratta Nov 15, 2018



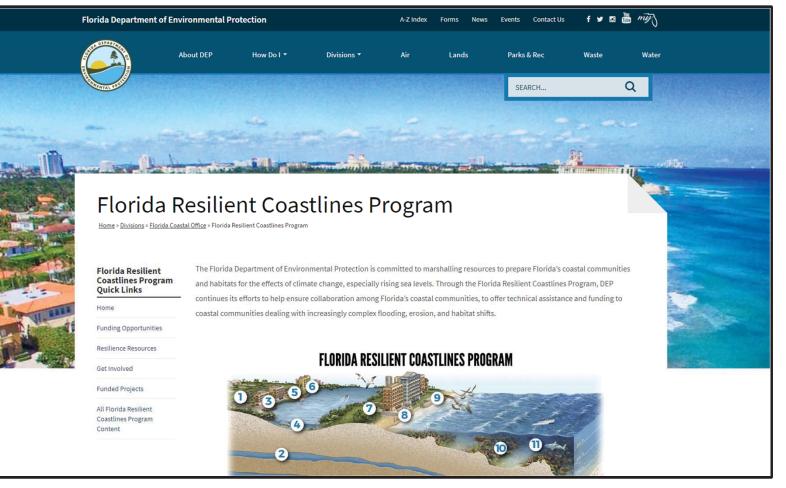
- All lines are muted.
- Submit questions through the webinar chat box.
- Presentation can be downloaded from the handouts link.
- This webinar is being recorded and will be posted online at <u>https://floridadep.gov/resilience</u>
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## Website ... https://FloridaDEP.gov/resilience









## **Grant Programs Crosswalk**

Federal NOAA Grant #'s	NA16	NA17	NA18
Agreement Beginning Date	Standard Grant Agreement Pg. 1	Standard Grant Agreement Pg. 1	Standard Grant Agreement Pg. 1
Work Plan	Attachment 3	Attachment A	Attachment 3
Progress Report	Exhibit A	Attachment D	Exhibit A
Payment Request Summary Form	Exhibit C-1	Attachment B, C & Exhibit-I	Exhibit C-1
Final Report	Exhibit F	Attachment E	Exhibit F
Release Form	Exhibit G	Attachment J	Exhibit G
Ending Date	06/30/2019	06/30/2019	06/30/2019







## **Presentation Agenda**

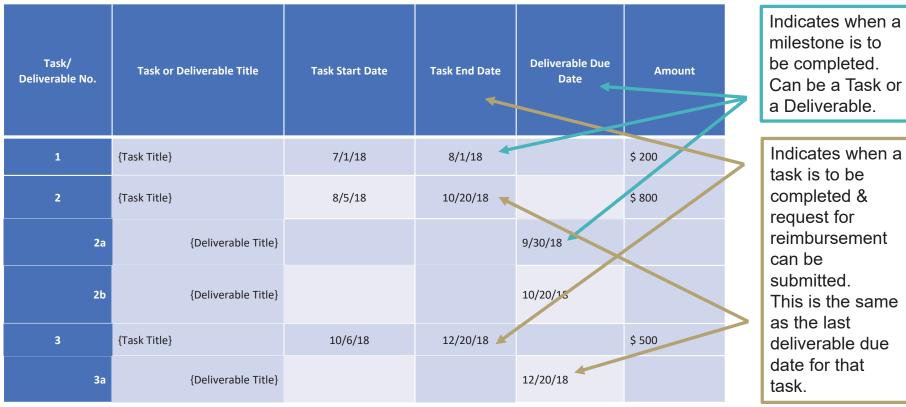
- Project Timelines
- Deliverables, Tasks, Reports
- Contractual Services
- Reimbursement documents





## **Project Timeline**

How the Project Timeline is used and why it is needed.





### **Deliverable(s)**

- A deliverable signals the end of a task or accomplishment of a milestone, as outlined in the work plan.
- Deliverables are to be quantifiable, measurable and verifiable.
- All deliverables are to be received by the designated due date per the grant agreement Project Timeline.
- All deliverables must be accepted and approved by the DEP per the Project Timeline in the grant agreement.





## Deliverable Example Project Timeline



- Each deliverable is to be submitted by the due date on the Project Timeline.
- Each deliverable must be reviewed
  - and approved by DEP.







### Task(s)

- A task(s) can have more than one deliverable attached to it.
- All deliverables in a task(s) must be completed 100%, accepted and approved by DEP before an invoice will be approved for reimbursement.
- A completed progress report *(Exhibit A)* is to accompany every task(s) that is completed to indicate the completion of that task, and status on future task(s).
- A completed task can trigger a request for reimbursement to be submitted.





## **Task Example**

## **Project Timeline**

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Task/ Deliverabl e No.	Task or Deliverable Title	Task Start Date	Task End Date	Deliverable Due Date	Amount
1	CD of Mapping	07/01/18	09/30/18 🧮		\$ 200
2	{Task Title}	08/05/18	01/20/19		\$ 800
2a	{Deliverable Title}			11/30/18	
2b	{Deliverable Title}			01/20/19	
3	{Task Title}	01/26/19	02/20/19		\$ 500
За	{Deliverable Title}			02/20/19	

- All deliverables for the task must be approved by DEP before any reimbursement is processed.
- A completed task can be submitted with the Payment Summary Report, and all backup documentation required, to request reimbursement.





## **Progress Reports**

How often are they to be submitted?

- Submitted after every quarter.
  - Q1 = July 1 Sept. 30
  - Q2 = Oct. 1 Dec. 31
  - Q3 = Jan. 1 March 31
  - Q4 = April 1 June 30
- Submitted with every task completion, when requesting reimbursement.
- NA17 agreements (*Attachment D*) indicate they are due by the 5<sup>th</sup> day of the month following the completed quarter. (*See Crosswalk*)
- NA16 & NA18 agreements *(Exhibit C)* indicate they are due by the 20<sup>th</sup> day of the month following the completed quarter. *(See Crosswalk)*





- Complete the template to be used for submitting Progress Reports (Exhibit A - See Crosswalk)
- Be sure to list all tasks, as outlined in your grant agreement to include:
  - Task Title
  - Progress for each task(s) made to date, to include completion dates when available.
  - Notification of any delays or problems encountered.
- Remember, a progress report is required when submitting a request for reimbursement showing that task is 100% completed.







Contractual cervices exist when there is any portion of the **work being done** for the project, **that is NOT being completed by the grantee directly**, but by a subcontractor to the Grantee.

### All requests for contractual services reimbursement dollars must have the following in place:

- DEP must have a copy of the fully executed agreement(s) between the Grantee and the subcontractor(s).
- All contractual services budgeted line items are to be used for subcontractual agreement(s) and reflect payments made to them by the grantee, for goods/services rendered.

Remember that some grants have work being completed by the grantee, and by subcontractor(s).





# Required Documents for Reimbursement

- Progress Report (Exhibit A See Crosswalk)
- Completed Payment Summary Report (Exhibit C-1)
- All invoices from vendors/subcontractors to the grantee.
  - Proof of payment from grantee to vendors/subcontractors.
  - Paystubs for proof of payment of salaries and fringe.
  - Deliverables received and approved by DEP for requested reimbursement funds.
- Final Report (*Exhibit F*) when submitting final Payment Summary Report at completion of project.
- All Release forms (*Exhibit G*) when applicable per the project.







## **Reimbursement Process**

What information is required to be on documents when requesting reimbursement?

*Invoices from vendor(s)* showing the following:

- Vendor name requesting payment
- Detailed description of goods/services performed
- Date or range of dates that goods/services were performed
- Amount charging for goods/services provided
- Grantee's name as the entity being billed for goods/services provided.

**REMINDER: Redact Checking Account Numbers** 







# Reimbursement Process (continued)

### **Proof of payment(s) to vendor(s)** showing the following:

- Name of vendor to whom the payment was made
- Amount of payment
- Date payment was made
- Grantee's documents indicating funds were processed through them via:
  - A bank or credit card statement, showing the bank's name,
  - A cancelled check (front & back), and/or
  - An invoice showing a zero balance and method of payment made by grantee.





## **Exhibit C-1 Payment Summary Report**

PAYMENT	EXHIBIT C REQUEST SUMMARY FORM
Agreement No.	Request Date:
tee's Grant Manager Name:	
itee:	
e & Mailing Address)	
No(s)	Total Task Amount(s) Requested:

rmance	Period .	- Date	Kange:		
			~	-	

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GRANT EXPENDITURES SUMMARY SECTION

CATEGORY OF EXPENDITURE (As authorized)	AMOUNT OF THIS REQUEST
Salaries/Wages	
Fringe Benefits	
Indirect Cost	
Contractual (Subcontractors)	
TOTAL REIMBURSEMENT REQUESTED AMOUNT	s -

GRANTEE CERTIFICATION

 The disbursement amount requested is for allowable costs for the project described in Attachment 3 of th Agreement.
All costs included in the amount requested have been satisfactorily performed, received, and applied tow

completing the project; such costs are documented by invoices or other appropriate documentation as required the Agreement. 3. The Grantee has naid such costs under the terms and provisions of contracts relating directly to the project:

the Grantee is not in default of any terms or provisions of the contracts.

Grantee's Grant Mana	ger's Signatur	e
Print Name		

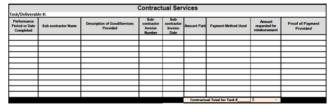
Exhibit C-1 Revised Payment Summary Request Page 1

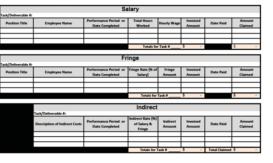


Page 1 = Invoice/ Summary Page 2 = Contractual Services Page 3 = Salaries,

Fringe & Indirect

Complete one table per Task containing Contractual Reinbursement Requests Add rows as needed for each table. Add tables as needed, if more than two tasks are in Be sure to attached the original invoices to the Grantee, and proof of payment docum Formulas are included in some of this spreadsheet cells, denoted with "5 - \* .





SALARY AND FRINGE DETAIL





Exhibit C-1 Revised Payment Summary Request Page

DEP Agreement No.	
Payment Request No.	Request Date:
Grantee's Grant Manager Name:	
Grantee:	
(Name & Mailing Address)	

Performance Period - Date Range:

### GRANT EXPENDITURES SUMMARY SECTION

CATEGORY OF EXPENDITURE (As authorized)	AMOUNT OF THIS REQUEST
Salaries/Wages	
Fringe Benefits	
Indirect Cost	
Contractual (Subcontractors)	
TOTAL REIMBURSEMENT REQUESTED AMOUNT	\$ -

This acts as your invoice to DEP and summarizes the reimbursements that you are requesting.

### Signatures required

of the grantee, and its fiscal agent, certifying all documentations presented, at the bottom of the page.



## **Exhibit C-1 Payment Summary Page 2**

CONTRACTUAL DETAIL

Complete one table per Task containing Contractual Azimbursoment Azquests Add rows as needed for each table. Add tables as needed, if more than two tasks are in the invoice. So sure to attached the original invoices to the Grantee, and proof of payment documents. Formulas are included in some of the spreadsheet calls, denoted with "\$ - \* ".

	Contractual Services								
Teak/Deliverabl	la X:								
Performance Period or Date Completed	Sub-contractor Name	Description of Good/Services Provided	Sub- contractor invoice Number	Sub- contractor invoice Uate	Amount Pard	Payment Method Used	Amount requested for reinbursement	Proof of Payment Provided	
					Contract.	al Totel for Teak #	•		



- List reimbursable amounts requested for payments made to subcontractors.
- Complete a separate table for each completed task.
- Attach all vendor/subcontractor invoices, with proof of payment documents.

## Exhibit C-1 Payment Summary Page 3

#### SALARY AND FRINGE DETAIL

Complete one table for each task containing Salary, Fringe, and Indirect Cost Reimbursement Requests Add rows as needed for each table. Add tables as needed, if more than two tasks are in the invoice. So sure to attached a copy of employee's pay stubs as proof of payment. Formulas are included in some of the spreadsheet cells, denoted with "S = -".

Task/Daliverable #:								
Position Title	Employee Name	Performance Period or Data Completed	Total Hours Worked	Hourly Wege	Invoiced Amount	Date Paid	Amount Claimed	
			Totels fo	r Teak #	\$.		•	

Task/Onliverable #:								
Position Title	Employee Name	Performance Period or Date Completed	Pringe Rate (16 of Selary)	Pringe Amount	Invoiced Amount	Date Paid	Amount Claimed	
			Totals for	Tank #	\$ .		ś .	

		Indirect				
Teak/Deliverable 8: Description of Indirect Costs	Performance Period or Date Completed	Indirect Rete (%) of Selery & Fringe	Indirect Amount	Invoiced Amount	Date Paid	Amount Claimed
		Totals for 1	'aak #	\$.	Total Claimed	ś.,

List reimbursable amounts requested for salaries of employees, fringe and indirect costs.

Include pay stubs as proof of payment.







- Final Report (Exhibit F)
  - This report is required even if previously submitted a quarterly report.
- Confirmation that all deliverables have been submitted and approved by DEP.
- Completed Payment Summary Report (Exhibit C-1) for final reimbursement request.
- All Release forms *(Exhibit G)* have been submitted when applicable per the project.
- Welcome invitations to share in your success.







## **Questions?**





### Florida Department of Environmental Protection (FDEP) Florida Coastal Office (FCO) Florida Resilient Coastline Programs (FRCP)

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