



AmeriCorps Washington

Fixed Grants - Invoice Process

July 14 – 3:00pm Session

Please sign-in via the chat box:

- Organization/Program
- Name(s)
- Favorite summer activity?

Resources

[eCFR :: 2 CFR Part 200 -- Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards](#)

[Additional Resources | Serve Washington](#) (Special Terms and Conditions and AmeriCorps Terms and Conditions links)

[AmeriCorps Program Handbook | Serve Washington](#)

[Fixed Amount Grant Guide \(americorps.gov\)](#)

[Fiscal Workbooks will be provided once contracts are complete](#)



Drawing Funds Special Terms and Conditions III I 3

Accessing Grant Funds under Fixed-Amount Grants: For fixed-amount grants, you must ensure that you do not request more funds from Serve Washington than you are entitled to draw based on members enrolled. You may request funds on a monthly basis throughout the year. Reconciliation will occur in the final month to ensure the subgrantee does not draw funds in excess of member hours served. The schedule to request funds from Serve Washington is based on a monthly report of hours served by members.

An invoice package is **due on or before the 15th** of the month for the previous month's reporting period and must include: 1) a Washington state A-19 Invoice Voucher (*signed PDF*); 2) Invoice Tracking Sheet (*leave and submit in original Excel format*); 3) a current Member Roster from the My AmeriCorps Portal (*PDF*); and 4) a relevant timekeeping report from a timekeeping system (*any format*). Submit the entire invoice package by email to your Program Officer and Fiscal Grants Officer.



Time Tracking

AmeriCorps State and National Terms and Conditions V H

- Each slot type has a minimum number of hours the member is required to serve, FT=1700, HT=900, etc
- This number is the MAXIMUM number of hours you can be reimbursed for from that individual—hours beyond that do not get reimbursed
- Hours reported for the month will determine your reimbursement
- Note whether the numbers are accurate to the month, or whether a correction or delay has affected the number
- Explain excessive totals (much in excess of 200 for a month)
- Your time tracking tool should accurately report the current month, show a cumulative total, and remove hours exceeding maximum from the reimbursement calculation



Member Roster Report pdf eGrants

I will compare to names on the time tracker

Member Roster Report

Searched for:
 Program: ██████████
 Grant Year: 2021

Did not Earn an Award

GRANT YEAR	PROGRAM CODE	PROGRAM NAME	ENROLLMENT START DATE	ENROLLMENT END DATE	MEMBER LAST NAME	MEMBER FIRST NAME	MEMBER MIDDLE NAME	NSPID	UNDER 17?	ENROLLMENT TYPE	MEMBER STATUS	START DATE	EXPECTED CMP. DATE	COMPLETION DATE	HOURS	EXPECTED HOURS	% COMPLETED
█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█
█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█
█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█
█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█

Total members in this category: 4

Earned an Award

GRANT YEAR	PROGRAM CODE	PROGRAM NAME	ENROLLMENT START DATE	ENROLLMENT END DATE	MEMBER LAST NAME	MEMBER FIRST NAME	MEMBER MIDDLE NAME	NSPID	UNDER 17?	ENROLLMENT TYPE	MEMBER STATUS	START DATE	EXPECTED CMP. DATE	COMPLETION DATE	HOURS	EXPECTED HOURS	% COMPLETED
█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█
█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█
█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█

Total members in this category: 3


Earning an Award

GRANT YEAR	PROGRAM CODE	PROGRAM NAME	ENROLLMENT START DATE	ENROLLMENT END DATE	MEMBER LAST NAME	MEMBER FIRST NAME	MEMBER MIDDLE NAME	NSPID	UNDER 17?	ENROLLMENT TYPE	MEMBER STATUS	START DATE	EXPECTED CMP. DATE	COMPLETION DATE	HOURS	EXPECTED HOURS	% COMPLETED
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Workbook and Invoice (A19)

- Please include the Excel Workbook with the invoice tracker
- Also include a pdf of the signed invoice
- Check to be sure you have updated the date, etc.

FORM A-19-1A (Rev. 6/95)		STATE OF WASHINGTON INVOICE VOUCHER	AGENCY USE ONLY		
			AGENCY NO.	LOCATION CODE	P.R. OR AUTH. NO.
					PY20/21
AGENCY NAME			<i>INSTRUCTIONS TO VENDOR OR CLAIMANT : Submit this form to claim payment for materials or services. Show complete detail for each item.</i>		
Serve Washington			Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for materials, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.		
c/o Office of Financial Management					
P.O. Box 43113					
Olympia, WA 98504-3113					
VENDOR OR CLAIMANT (Warrant is to be payable to)			BY		
			(SIGN IN BLUE INK)		
					9/10/2020
			(TITLE)		(DATE)
			By submission of this invoice, I certify that eligibility and national service criminal history checks were timely and compliant for staff and AmeriCorps members.		
FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)			RECEIVED BY		DATE RECEIVED



Fixed Cost Grants

Hourly Invoice Training

Serve Washington
Training, 8 July 2020

Your Program Name - 2020-2021		Invoice Period	# Member Hours Served*	Allowable Invoice Amount	Requested Payment Amt.	Invoice #
CNCS Grant #		31-Jul	2422.00	\$21,644.13	\$21,644.13	1
ServeWA Agreement #		31-Aug	3299.00	\$29,481.42	\$29,481.42	2
				\$0.00		3
Total Grant Award:	\$288,648			\$0.00		4
Total Hours to Be Served:	32,300			\$0.00		5
				\$0.00		6
Average Hours Per Month:	2692			\$0.00		7
Actual Average Per Month:	2860.5			\$0.00		8
				\$0.00		9
				\$0.00		10
				\$0.00		11
	Final Invoice**			\$0.00		12
	Total Invoiced		5721.00	\$51,125.55	\$51,125.55	
Total MSYs Awarded	19		YTD MSYs Enroll	19		
Cost Per MSY	\$15,192		Cost Per MSY	\$2,690.82		

* - Programs may invoice up to the maximum hours limit per slot type as specific in the Fixed Amount Grant Financial and Administrative Process Guide. Programs that have members serving in less-than-full-time slots should have a conversation with their Program Officer to discuss how those smaller slots are to be handled. Hours reported for a given invoice period do not have to be served in the same invoice period, however "hours cannot be previously reported/counted for payment" from Serve Washington.

** - Final Invoice Payment should be scheduled with your Program Officer to ensure accurate final payment.

For the Final Invoice, the total # of Member Hours Served must match the Total Number of Approved Hours minus any hours served over the maximum hours limit per slot type as specific in the Fixed Amount Grant Financial and Administrative Process Guide



Fixed Cost Grants

Hourly Invoice Training

		Lenman, Bruce (OFM): Must manually input Yellow Cells.														
DATE	DESCRIPTION			AMOUNT	FOR AGENCY USE											
9/10/2020	CNCS Grant # 19ESHW001 Fixed Amount, Serve Washington Agreement # K1234															
Invoice Period:		8/1/2020	to	8/31/2020												
Hours Completed by Members for Current Invoice Period*		3299.00														
Total Hours Completed to Date*		5721.00														
Amount Invoiced to Date:		\$21,644.13														
Allowable Amount for Current Invoice:		\$ 29,481.42														
INVOICE PAYMENT REQUESTED:				\$29,481.42												
*Note: There is an assumption that hours being included in this invoice do not include hours served by members served over the maximum hours limit per slot as specified in the Fixed Amount Grant Financial and Administrative Process Guide.																
Invoice Calculation Formula:																
$\frac{\text{\# hours completed by members to date}}{\text{Sum of hours to be served for all awarded slots}}$		x	Total grant award	=	Allowable amount for Current invoice											
Have you included the following with your invoice?																
<input type="checkbox"/> A relevant timekeeping report from a timekeeping system <input type="checkbox"/> Member roster <input checked="" type="checkbox"/> Signature and date on invoice																
PREPARED BY		TELEPHONE NUMBER		DATE	AGENCY APPROVAL											
DOC. DATE	PMT DUE DATE	CURRENT DOC. NO.	REF. DOC NO.	VENDOR NUMBER	VENDOR MESSAGE											
REF	TRASH	M	FUND	APPN	MASTER INDEX	SUB	SUB	ORG	WORK	COUNTY	CITY	PROJECT	SUB	PROJ	AMOUNT	INVOICE NUMBER
DOC	CODE	O		INDEX	PROGRAM	OBJ	SUB	INDEX	CLASS	BUDGET	TOWN	PROJECT	PROJ	PHASE		
SUF		D		INDEX	INDEX	OBJ	OBJ		ALLOC	UNIT	MOS					
ACCOUNTING APPROVAL FOR PAYMENT										DATE		WARRANT TOTAL		WARRANT NUMBER		



Reconciliation

- When all of your members have exited, send me your final member roster report, and I will conduct a reconciliation
- I will give you the reconciliation, and when you approve you can invoice us for the reconciled amount with your completed Workbook
- This fixes errors made during the year, as well as evening out slot values/hour
- We hope to avoid requiring repayment from programs!

					24-Jan-22			
Number of MSYs					40			
Cost Per Member					\$ 11,250.00			
Grant Amount					\$ 450,000.00			
Full MSY					Calculations			
FT: 1700 MSY					24	100%	\$11,250.00	\$ 270,000.00
HT: 900 MSY					12	100%	\$ 5,625.00	\$ 67,500.00
MT: 300 MSY					4	100%	\$ 2,488.10	\$ 9,952.38
Subtotal							\$ 347,452.3810	
Prorated = Member who "Ended Service Early"								
Name	NSPID	End Date	Hours	Percentage				
		09/30/2021	1260	74.12%			\$11,250.00	\$ 8,338.24
		10/01/2021	1415	83.24%			\$11,250.00	\$ 9,363.97
		09/15/2021	1064	62.59%			\$11,250.00	\$ 7,041.18
		01/13/2022	1286	75.65%			\$11,250.00	\$ 8,510.29
				0.00%			\$11,250.00	\$ -
							\$ 33,253.6765	
Total Due (Full + Prorated)							\$ 380,706.06	\$ 380,706.0575
Less Payments-to-Date							\$ 368,763.74	
Settlement / Invoice:							\$ 11,942.32	
1200 MSY					70.00%	11250	7,875.00	
900 MSY					50.00%	11250	5,625.00	
675 MSY					38.06%	11250	4,281.62	
450 MSY					26.41%	11250	2,971.32	
300 MSY					21.16%	11250	2,488.10	



Other Fiscal Reporting

- **Midyear** (April)
 - Special Terms and Conditions III K
 - Unexpended (we may collect unexpended funds report)
- **Final** (Grant Year End)
 - Special Terms and Conditions III L
 - Closeout (we may collect closeout documents)



Closing

Questions?

