

## **INSTRUCTIONS SIERRA NEVADA CONSERVANCY (SNC) REQUEST FOR PAYMENT (RFP) – PROPOSITION 84 GRANT PROGRAMS**

**Heading:** Enter the identifying information requested at the top of the form: Date, Report Period, Agreement Number, SNC Reference Number (if applicable), Agreement Term, Authorized Grantee Name, Remittance Address, and Contact Person.

**1) Project Budget Categories:** Enter the project budget category title as shown on Exhibit A of the grant agreement under Project Cost/Project Budget Categories. Only these budgeted categories are reportable for expenses.

**2) Budgeted Expenses:** Enter the amount of each budget category as shown on the Exhibit A of the grant agreement. The RFP Form will automatically calculate the total for the column. The total must be the same as your executed grant agreement plus any approved amendments.

**3) Expenses This Reporting Period:** Enter your costs for this reporting period according to the budget categories shown in Exhibit A. The RFP form will automatically calculate the total for the column. Confirm that the total includes all expenses for the reporting period prior to signing the certification signature and submitting your form.\*\*

**4) Year to Date Expenses:** Enter the cumulative costs to date **including this reporting period** using your prior RFP information. The RFP form will automatically calculate the total for the column. Ensure that the total to-date costs are accurate prior to the certification signature and submittal of the form.

**5) Balance (Budgeted Expenses Less Year-to-Date Expenses):** This column calculates the balance of the grant agreement based on the budgeted expenses less the total expenses submitted for reimbursement to date. The RFP form in Excel format will automatically calculate these figures.

**6) Percent of Actual Year-to-Date Expenses to Budgeted Expenses:** Represents the percentage of to-date expenses compared to the budgeted funds available under the grant agreement, according to budget categories. The Request for Payment form in Excel format will automatically calculate the percentages.

**7) Total Reimbursement Report Period Expenditures:** This amount represents the total of the items shown for the “Expenses This Reporting Period”. The total in this column is automatically calculated as part of the Request for Payment in the Excel format.

**8) 10% Withholding or Other Adjustments (If Any):** Per the 10% retention requirement in SNC Grant Agreements, this field will automatically deduct 10% from the “Expenses This Reporting Period” Column Total. This retention will be held until the final report is submitted and approved, and the project is 100% complete.

**9) Authorized Advance Balance (Applicable to those with Advances):** Enter the total amount of any outstanding advance funds issued under the grant agreement. Using prior Request for Payment worksheets and/or advance balance statements received from the SNC, enter your new balance.

**10) Enter Advance Interest Earned (Applicable to those with Advances):** Enter the amount of interest earned for the reporting period.

**11) Total Advance Balance:** This field automatically calculates the sum of the outstanding Advance balance and interest earned.

**12) Amount Applied to Advance Repayment:** This field automatically calculates the amount of the Invoice that will be applied to reduce your advance balance per the Advance Payment Authorized letter provided by SNC.

**13) Remaining Advance Balance:** This field automatically calculates the remaining balance of your Advance. This is the amount you will enter into your next RFP’S authorized balance.

**14) Requested Reimbursement:** Represents the actual funds to be reimbursed for the reporting period. This figure is automatically calculated as part of the Request for Payment Form in the Excel format. This payment amount represents the expenses for the period, less the retention and/or repayment of advance funds. **Keep copies of all Request for Payment forms for your files.**

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**Grantee's Certification:** Enter the printed name and title of the authorized grantee representative with their original signature. ***Requests for payment cannot be processed without the original signature of the project's Authorized Representative.***

**\*\*Supporting Documentation:** All Request for Payment submissions must be accompanied by a summary coversheet that itemizes the expenses being submitted for the Budget Category it applies to along with subtotals for each of the Budget Categories shown on Exhibit A. Every expense submitted for reimbursement must be accompanied by supporting documentation that clearly substantiates the expense. Supporting documentation is as follows:

- ✚ Purchases must include copies of invoices, receipts
- ✚ Personnel Costs must include timesheets/reports showing hours and hourly wage applied to SNC grant.
- ✚ Travel expenses must include copies of expense receipts, mileage reports to include miles and mileage rate noting the restrictions listed below:
  - Staff travel expense is reimbursable at the state per diem rates
  - Mileage is reimbursable only up to the current IRS standard rates

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