

## **RW GY32 Part B Sub-Recipient Kickoff Meeting April 6, 2022**

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# **Invoicing During the Award Period**

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Fiscal Management and Administrative Service

# INVOICING DURING THE AWARD PERIOD

## APRIL 1, 2022 TO MARCH 31, 2023

### • Invoicing Requirements

- ❖ Sub-grantees are required to submit monthly invoices **with** the supporting documentation outlined in the **terms of condition in the Notice of Grant Award**
- ❖ All invoices must be submitted by the **ten (10th)** business day for reimbursement of the preceding month's expenditures.
- ❖ The sub-grantee must use the HIV/AIDS, Hepatitis, STD & Tuberculosis Administration (HAHSTA) approved invoice form provided with the appropriate columns: the total grant budget, year to date expenditures, and monthly expenses for the previous month completed.
- ❖ The Grants Management Specialist (GMS) is required to send a late invoice notice in accordance with the Office of Grants Management Late Invoice Submission Notification Protocols *when your invoice is not received by the 10th business day.*

### • Grants Management Specialist (GMS)

- ❖ The GMS will maintain a spreadsheet of grant expenditures during the award period to keep track of possible under/over expenditures and appropriate charges. *The minimum required documentation for a complete invoice package includes, copy of signed time sheets, copy of the payroll register, general ledger and financial reporting template for each service category, and monthly programmatic report.*
- ❖ The GMS will be reviewing all supporting evidence for each item of cost claimed for the requesting month.
- ❖ YOUR GMS is here to provide technical assistance during the award period.

# The Invoicing Process

## (A Team Effort by all parties)

### Enterprise Grants Management System (EGMS)(Octo.onelogin.dc.gov)

- ❖ The Sub-grantee is responsible for submitting the invoice form with the defined supporting documentation (General Ledger, Financial Form for each service category, signed timesheets and payroll register) by the **10<sup>th</sup> business day**. **Note; On the 11th business day if the invoice is not received your agency will be receiving an email invoice late reminder.**
- ❖ The GMS and Program Officer will review the invoice and program narrative for completeness, accuracy, documentation compliance with grant regulations and the approved budget.
- ❖ Once the required elements are satisfied the invoice is forwarded to the assigned project officer for final approval. *The invoice will be rejected if any of the required elements are not satisfied.*
- ❖ Once the invoice has been fully approved in EGMS, the system will generate a **Payment Authorization Notice (PAN)** sent via email to the authorized sub-grantee representative. The authorized sub-grantee representative was designated when enrolling into EGMS. Please know who that designee is.

**BUT IT DOES NOT END THERE!!!!!!**

### The DC Vendor Portal /

### Procurement Automated Support System (PASS)

- ❖ The sub-grantee has **three (3) business days** within receipt of the PAN, to submit the payment request into the DC Vendor Portal/Procurement Automated Support System/PASS.
- ❖ If the invoice is not received in the DC Vendor Portal/PASS by Close of Business (COB) on the **3<sup>rd</sup> business day**, a late invoice reminder will be sent via email to the sub-grantee by your GMS on the **4<sup>th</sup> business day**.
- ❖ Should the invoice remain outstanding after the third (3<sup>rd</sup>) late notice, a Remediation/Corrective action plan will be implemented in accordance with Remediation/CAP guidance.
- ❖ The GMS will approve or reject the invoice/voucher in PASS. The GMS will verify the voucher for the correct dollar amounts, dates of service, invoice number and purchase order number prior to approval of the voucher. Please ensure that the invoice number on the coversheet and the vendor portal match. The invoice number must include the month and year (i.e., AUG and 2021).
- ❖ Once approved by the GMS, the Contract Administrator (CA) and Accounts Payable (AP) Specialist to process the payment of the invoice.
- ❖ This process should take less than 30 days from start to the issuance of a check.

**THEN IT IS ON TO THE NEXT!!!!!!**

**YOU ARE DONE!!!!!!!!!!!!!!**

# Purchase Order

- PO. Line 1 Ryan White \$50,000
- PO Line 2 Federal Payment \$25,000
- PO Line 3 Rebate \$15,000
- PO Line 4 Adm. \$10,000
- Total \$100,000

The Purchase orders are loaded with braided funding sources representing a 65%/35% split. Sub-grantee must ensure that the correct amounts are invoiced on the appropriate line item.

# Financial Reporting Template

Complete a separate form for each service funded and complete a separate form summarizing total expenditures for invoice period.

Ryan White

BUDGET CATEGORY	TOTAL BUDGET	YTD	EXPENDITURES	PRIOR PD. YTD.
		EXPENDITURES	THIS PERIOD	EXPENDITURES
1. SALARIES AND WAGES				
2. FRINGE BENEFITS				
3. CONSULTANT/EXPERTS				
4. OCCUPANCY				
5. TRAVEL AND TRANSPORTATION				
6. SUPPLIES AND EQUIPMENT				
7. CAPITAL EQUIPMENT AND OUTLAYS				
8. CLIENT COST				
9. COMMUNICATION				
10. OTHER DIRECT COST				
11. INDIRECT OVERHEAD				
12. SUB-TOTAL	0.00	0.00	0.00	-
13. LESS ADVANCE	0.00	0.00	0.00	-
14. TOTAL	0.00	0.00	0.00	-

# Sample Service Area –General Ledger

## Service Area Month of Invoice

Employee	Position	Salary	Program Cost	FTE
John Doe	Case Manager	4,529.28	2,038.18	45%
Jane Doe	Social Worker	4529.28	216.24	5%
James Doe	HIV Case Manager	4529.28	1,132.32	25%
Joanne Doe	Social Worker	5,004.00	1242.13	25%
<b>Total Personnel</b>		<b>18,591.85</b>	<b>4,627.87</b>	
<b>Fringe Benefits @ 24%</b>			<b><u>1,110.69</u></b>	
<b>Sub-Total Personnel &amp; Fringe</b>			<b>5,738.56</b>	
<b>Travel</b>				
<b>Equipment</b>				
<b>Supplies</b>				
<b>Communications</b>				
<b>Contractual</b>				
<b>Other Direct</b>				
<b>Sub-Total</b>			<b>_____</b>	
<b>Total Direct Cost</b>			<b>5,738.56</b>	
<b>Indirect/Overhead @ 10%</b>			<b>573.86</b>	
<b>Total</b>			<b><u>6,312.42</u></b>	

# Invoice Cover

<p>Vendor Name _____</p> <p>Vendor Payment Address _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Vendor ID No. _____</p>												<p>Grant/Contract Number _____</p> <p>Invoice Number _____</p> <p>Billing Period _____ to _____</p> <p>Grant Period _____ to _____</p> <p>Service/Program _____</p>			
<p>Vendor's Certification: I certify that the amounts entered are true and are fully supported by the required accounting records of my organization, which are available for examination under oath.</p> <p>Signature _____ Date _____</p> <p>Print Name _____ Phone _____</p>												<p>I certify that this invoice is in accordance with terms and is approved for payment.</p> <p>Agency Entry Only</p> <p>Grant/Contract Number _____ Date _____</p> <p>Grant/Contract Administrator _____ Date _____</p>			
	(1) Expenditures October	(2) Expenditures November	(3) Expenditures December	(4) Expenditures January	(5) Expenditures February	(6) Expenditures March	(7) Expenditures April	(8) Expenditures May	(9) Expenditures June	(10) Expenditures July	(11) Expenditures August	(12) Expenditures September	(13) Year-to-Date Expenditures	(14) Current Balance	% Spent
	TOTAL	TOTAL	TOTAL	TOTAL	TOTAL	TOTAL	TOTAL	TOTAL	TOTAL	TOTAL	TOTAL	TOTAL			
1. Salaries and Wages													\$	\$	000000
2. Fringe Benefits													\$	\$	000000
3. Consultants/Experts													\$	\$	000000
4. Occupancy													\$	\$	000000
5. Travel and Transportation													\$	\$	000000
6. Supplies & Minor Equipment													\$	\$	000000
7. Capital Equipment & Outlay													\$	\$	000000
8. Client Costs													\$	\$	000000
9. Communications													\$	\$	000000
10. Other Direct Cost													\$	\$	000000
11. Indirect Cost/Overhead													\$	\$	000000
Subtotal Before Fee	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	000000
12. Fee (_____% of Subtotal)													\$	\$	000000
14. Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	000000

# QUESTIONS?



# DC | HEALTH

GOVERNMENT OF THE DISTRICT OF COLUMBIA

899 North Capitol Street NE, 5th Fl, Washington, DC 20002

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For more information on the District's COVID-19 response, visit [coronavirus.dc.gov](https://coronavirus.dc.gov)