

Prop 64 Cohort 2 Desk Reviews

Supporting Documentation Submission



Invoice Supporting Documentation

SALESPERSON		P.O. NUMBER	REQUISITIONER	SHIPPED VIA	F.O.B. POINT	TERMS
						Due on receipt

QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL
SUBTOTAL			
SALES TAX			
SHIPPING & HANDLING			
TOTAL due			

Make all checks payable to [Your Company Name]
If you have any questions concerning this invoice, contact [Name, phone, e-mail]

Thank you for your business!

- Grantees must maintain supporting documentation for all grant expenditures claimed on invoices.
- All supporting documentation must be maintained by the grantee on site and be readily available for review during BSCC site visits (or virtual visits).
- Examples of supporting documentation are: receipts, invoices, work orders, etc.

Invoice Supporting Documentation Packet

- Steps for Completing the Invoice Supporting Documentation Packet AKA Desk Review
- Separate from Quarterly Invoicing Process
- Must Submit:
 1. Grantee Salaries and Benefits Worksheet
 2. Supporting Documents, labelled
 3. Grantee Invoice Supporting Documentation Checklist

Invoice Supporting Documentation Packet

Grantee Instructions for Completing the Invoice Supporting Documentation Packet

October 2019

Following are the steps to submit an electronic Supporting Documentation Packet with your grant invoice. Please complete all steps accurately. Incomplete supporting documentation may be returned for correction/revision. For more information refer to the BSCC Grant Administration Guide, which can be found under Quick Links on the Corrections Planning and Grant Programs homepage at:

http://www.bscc.ca.gov/s_correctionsplanningandprograms/

A. Preparation

1. Locate all project related receipts for each reimbursable, match and/or leveraged category item listed on the grant invoice (Form BSCC 201). Every item claimed on the invoice must have sufficient supporting documentation to clearly and accurately substantiate exact amounts claimed for reimbursement or match.
2. Label (handwritten is permissible) all documents to be submitted as verification for reimbursement with the Budget Line Item and Document Number (i.e., Assets/Equip – Doc#1, Assets & Equip –Doc #2, etc.). **Highlight** (or circle document labels and claimed amounts.

Logo Name **Services & Supplies Doc #1** Invoice

Company Slogan Date: 7/20/9 Invoice # 1234

Sold To: ORAVETT AND
175 ANGELO DRIVE
DUNSMUIR, CA 94555
(925)454-7891

Payment Method	Check No.	Job
CREDIT CARD		

Qty	Item #	Description	Unit Price	Discount	Line Total
1	153	PRODUCER 1	30.00		30.00
5	454	PRODUCER 5	41.00		205.00
3	789	PRODUCER 3	16.00		48.00
Total Discount					
Subtotal					283.00
Sales Tax					28.28
Total					311.28

3. In the Expenditure Description section of the Invoice (Form BSCC 201) clearly list corresponding supporting documents.

		Expenditure Description Units / \$ Amounts	
Services & Supplies	State Fund	\$	100
	Match Fund	\$	4,171
Services & Supplies	State Fund	\$	100
	Match Fund	\$	4,171

4. Only expenses that are incurred and paid for by the grantee during the grant cycle and before the end date of the applicable invoicing period are eligible expenses. This means the dates on all supporting documents must fall between grant start date and the

- Gather and label all project related receipts
- Dates on all supporting documents must fall between grant start date and the end of the applicable reporting period

Michelle's Computer Shack
123 Michelle St., Sacramento CA

Transaction Date: 3/1/21

Served by Michelle

Sacramento Store



Claiming $\$21.00 \times .10$ tax
= $\$23.10$

Purchase (Total 7 Items)

Surge Protector	1 x \$8.00
Printer Paper	2 x \$6.00
Dream Journal	1 x \$9.00
Printer Ink	1 x \$9.00
Gorilla Glue Spray	1 x \$6.00
Peanut M&M's	1 x \$2.00

Subtotal: \$46.00

Tax: \$4.60

Total: \$50.60

Debit: \$50.60

Check out our website at
www.michellesfakewebsite.com

> Highlight Whatever You Need to

> Clarify What you Are Claiming

> Show Us the Calculations

Invoice Supporting Documentation Packet

- Grantee Invoice Supporting Documentation Checklist -

Grantee Name:

Program: Prop 64

Invoice #:

Reporting Period:

This Checklist will be the cover page of your supporting documentation packet. Complete the checklist to match the invoice listed above. **This Checklist is not an invoice;** you must submit your invoice separately.

	Grant Funds	Attached Docs	For BSCC Use Only	
			✓	Initial
1. Salaries & Benefits	\$650	Salaries & Benefits Worksheet		
2. Services & Supplies	\$335	Serv & Sup-Doc #1		
3. Professional Services				
4. NGO Subcontracts				
5. Equipment / Fixed Assets				
6. Data Collection and Progress Reporting				
7. Other (Travel, Training, etc.)				
8. Indirect Costs				
Invoice Total	\$985			

Must be submitted with every Desk Review.

Every item on the invoice must have sufficient supporting documentation to substantiate exact amount claimed for reimbursement or match.

You will list the amount and support documents provided for each category here.

Grantee Invoice Supporting Documentation Checklist

Grantee Name: [REDACTED]

Program: [REDACTED]

Invoice #: [REDACTED]

Reporting Period: [REDACTED]

This Checklist will be the cover page of your supporting documentation packet. Complete the checklist to match the invoice listed above. **This Checklist is not an invoice**; you must submit your invoice separately.

		Amount	Attached Docs	For BSCC Use Only		
				✓	Comments	Initial
1. Salaries & Benefits	Grant Funds					
2. Services & Supplies	Grant Funds					
3. Professional Services	Grant Funds					
4. CBO Contracts	Grant Funds					
5. Indirect Costs (Admin. Overhead)	Grant Funds					
6. Fixed Assets/ Equipment	Grant Funds					
7. Data Collection/ Evaluation	Grant Funds					
8. Sustainability Planning	Grant Funds					
9. Other	Grant Funds					
Total	Grant Funds					
Invoice Total						

I have reviewed the attached invoice packet and supporting documentation and hereby certify it is true and correct; that the supporting documentation is sufficient to substantiate expenditures; and that all expenditures claimed meet the criteria and requirements of the grant program.

Authorized Financial Officer: Printed Name, Signature, Date



...maintain the invoice notes above. This document is for all invoices, you must submit your invoices separately.

		Amount	Attached Docs	For BSCC Use Only		
				✓	Comments	Initial
1. Salaries & Benefits	Grant Funds					
2. Services & Supplies	Grant Funds	\$100.00	Supporting Docs 1, 2, and 3			
3. Professional Services	Grant Funds					

Supporting Doc 1

Example Receipt 1

Item 1	\$10.00
Item 2	\$10.00
Item 3	\$10.00
Item 4	\$10.00

Supporting Doc 2

Example Receipt 1

Item 1	\$10.00
Item 2	\$10.00
Item 3	\$10.00
Item 4	\$10.00

Supporting Doc 3 **Total = \$100**

Order Receipt

Purchased by: Michelle Branch

Order ID 18976528739

Order Date: 3/4/21

Order Summary

Item 1	\$10.00
Item 2	\$80.00

Invoice Supporting Documentation Packet

- Grantee Salaries and Benefits Worksheet -



Grantee Salaries and Benefits Worksheet

Grantee Name

Program:

Invoice #:

Reporting Period:

I have reviewed this Grantee Salaries and Benefits Worksheet. By signing I hereby certify that it is true and correct and that all timesheets and supporting documents (including time studies) necessary to substantiate these expenditures are maintained on the project site and will be available upon request. All salaries and benefits claimed meet the criteria and requirements of the grant program.

Authorized Financial Officer: Printed Name, Signature, Date

Total Grant Funds	\$649.90
Total Match	\$0.00

Complete for staff whose expenditures are listed under Salaries & Benefits for the reporting period listed above. Delete red sample text before beginning.

Staff Name	Staff Position		Hours or % FTE	Hourly Pay or Monthly Salary	Enter # of Months or 1	Total	Benefits %	Benefits amount	Total Compensation	For BSCC Use Only	
										Comments	Initials
Bob Smith	Probation Officer	Grant Funds	20.00	\$24.25	1	\$485.00	34%	\$164.90	\$649.90		
		Grant Funds			1	\$0.00		\$0.00	\$0.00		
		Grant Funds			1	\$0.00		\$0.00	\$0.00		
		Grant Funds			1	\$0.00		\$0.00	\$0.00		
		Grant Funds			1	\$0.00		\$0.00	\$0.00		

- Report Salaries and Benefits by using the Worksheet.
- Please do not submit timesheets with your Desk Review. (Please continue to keep timesheets on-site.)

Grantee Salaries and Benefits Worksheet

Grantee Name:

Program:

Invoice #:

Reporting Period:

I have reviewed this Grantee Salaries and Benefits Worksheet. By signing I hereby certify that it is true and correct and that all timesheets and supporting documents (including time studies) necessary to substantiate these expenditures are maintained on the project site and will be available upon request. All salaries and benefits claimed meet the criteria and requirements of the grant program.

Authorized Financial Officer: _____
Printed Name, Signature, Date

Total Grant Funds	\$16,249.90
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Complete for staff whose expenditures are listed under Salaries & Benefits for the reporting period listed above. Delete red sample text before beginning.

Staff Name	Staff Position		Hours or % FTE	Hourly Pay or Monthly Salary	Enter # of Months or 1	Total	Benefits % amount		Total Compensation	For BSCC Use Only Comments Initials	
Michelle Obama	Grant Manager	Grant Funds	20.00	\$ 24.25	1	\$485.00	34%	\$164.90	\$649.90		
Michelle Trachtenberg	Administrative Assistant	Grant Funds	1.00	\$ 4,000.00	3	\$12,000.00	30%	\$3,600.00	\$15,600.00		
		Grant Funds			1	\$0.00		\$0.00	\$0.00		

Invoice Supporting Documentation Packet

Instructions for Completing the Invoice Supporting Documentation Packet

Important Note: Before beginning this process, please note that completing this Supporting Documentation Packet and completing the Grantee Invoice (Form BSCC 201) are two separate processes. You must do both. 1) Submit your invoice as normal; and 2) complete the steps outlined below to submit your Supporting Documentation Packet. The Grantee Invoice Supporting Documentation Checklist (Checklist) is not an invoice and cannot be processed as such.

A. Supporting Documentation Clarification

All grant funds, match, or leveraged amounts listed on your invoice must also be listed on your Checklist and be substantiated with the types of supporting documents described below.

1. **Salaries and Benefits:** You must complete the Salaries and Benefits Worksheet listing all staff whose salaries and benefits were claimed as grant expenditures, match or leveraged funds in the Salaries and Benefits category of the invoice.
 - a. The Authorized Financial Office must sign the Salaries and Benefits Worksheet to certify that the information is true and correct.
 - b. Do not submit timesheets with your desk review packet.
 - c. All timesheets and supporting documents (including time studies) must be maintained on the project site and available to BSCC staff upon request.
2. **Services and Supplies:** Electronic documentation will include itemized receipts, customer invoices, supplier invoices, itemized cash register tapes, internet receipts, etc.
 - a. The following items should be easily identifiable: vendor name, form of payment (cash, credit), amount of item or service, totals paid, dates of purchase, description of items.
 - b. If an itemized receipt contains both reimbursable and non-reimbursable items, submit a copy of the entire receipt, but make sure that the reimbursable items are highlighted or circled so they can be easily identified.
 - c. If there are multiple documents submitted for this line item, include a coversheet for the section that lists and totals the expenditures charged to the grant. The total must match what is listed on the invoice.
3. **Professional Services:** Use copies of invoices, work orders, etc. to substantiate costs for this line item.
 - a. If the invoice or work order does not provide sufficient detail, include a one-page statement that details the amount and how the expense meets the requirements of the grant program.
 - b. All supporting documents must be maintained on the project site and available to BSCC staff upon request. Do not submit timesheets. Only submit the invoice or work order and a one-page explanation if needed.
4. **Community Based Organization (CBO) / Non-Governmental Organization (NGO) Contracts:** Submit a copy of the invoice(s) to substantiate charges for this line item.
 - a. If the invoice does not provide sufficient detail, add a one-page statement that explains the expenditures and how they meet the requirements of the grant program.

- Instructions outline type of documentation that should be provided in each category.
- Difference in each category; please read instructions you receive for your Desk Review fully.

Invoice Supporting Documentation Packet

B. Preparation

1. In your Supporting Documents Packet, include sufficient supporting documentation to clearly and accurately substantiate each amount claimed for reimbursement, match or leverage.
2. Each item and dollar amount listed on the invoice must also be listed on the Checklist. Remember these are two distinct documents and processes. To receive reimbursement, you must submit your invoice separately, and it must be completed according to instructions including expenditure descriptions. Review of the supporting documents will not delay payment of your invoice.
3. Label (handwritten is permissible) all documents to be submitted as verification for reimbursement with the Budget Line Item and Document Number (i.e., Assets/Equip – Doc #1, Assets & Equip –Doc #2, etc.). **Highlight** (or circle document labels and claimed amounts).

- How to assemble and submit the completed Packet.
- Scan into a single PDF in the order outlined here.

My Company name **Sales Receipt**
My company slogan

Assets & Equip Doc #4

Date: September 2, 2013
Receipt #

Name: [Name of the person or a company]
Address: [Address]
[Address]

Code	Description	Qty	Price	Amount
12345	Product 1	10	10.00	100.00
54321	Product 2	20	15.00	300.00

Sale made by: Maria Carter

Subtotal	\$	400.00
Discount		-
Sales Tax Rate	%	10.00
Sales Tax	\$	40.00
Total	\$	440.00

Cash
Credit Card
Check
Money Order

Credit Card No. _____
Check No. _____
Money Order No. _____

Four Hundred Forty and NO

My files > Prop 64 Cohort 2 Grantee Folders > (



Name ▾



Desk Review

- Check your grantee folder in OneDrive
- You can use this folder as you assemble your desk review

My files > Prop 64 Cohort 2 Grantee Folders > (



Name ▾



Prop-64-Grantee-Salaries-and-Benefits-Wo...



Prop-64-Supporting-Documentation-Check...

- The required forms are conveniently located in your folder



Any
Questions?