## SFY 2024 AMERICAN RESCUE PLAN ACT (ARPA) STATE AND LOCAL FISCAL RECOVERY FUNDS (SLFRF) FIRST RESPONDER CAPITAL IMPROVEMENTS & INTEROPERABLE COMMUNICATIONS EQUIPMENT GRANT(CIIEG)

# **COMPLIANCE WORKSHOP SEPTEMBER 5, 2024**



#### AGENDA

Roll Call

#### Grant Requirements

Inventory Management

#### WebGrants

- Subaward Agreement
- Budget
- Reimbursement Request (Claims)
- Subaward Adjustment
- Status Report
- Correspondence
- Grant File
- Grant Closeout
- Monitoring

### GRANT REQUIREMENTS



#### **ARPA SLFRF CIIEG**

The purpose of the ARPA SLFRF CIIEG is to provide grant funding for first responder agency capital improvement projects and interoperability equipment projects.

#### FEDERAL GRANT REQUIREMENTS

Code of Federal Regulations 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards Regulations provide the foundational requirements for federal financial assistance

#### ARPA SLFRF Final Rule

Specific requirements to ARPA SLFRF funding

ARPA SLFRF Overview of Final Rule

Summary of Final Rule provisions for informational purposes

#### MISSOURI DEPARTMENT OF PUBLIC SAFETY (DPS) OFFICE OF HOMELAND SECURITY (OHS) GRANT REQUIREMENTS

#### ARPA SLFRF CIIEG Notice of Funding Opportunity

- Administrative Guide for Homeland Security Grants
- Subaward Agreement Articles of Agreement
- Information Bulletins
  - Information Bulletin 1: Policy on Monitoring
  - Information Bulletin 2: Policy on Advance Payment and Cash Advances
  - Information Bulletin 5: Policy on Reimbursement Requests
  - Information Bulletin 8: Policy on Budget and Program Revisions Subaward Adjustments

### MISSOURI DEPARTMENT OF PUBLIC SAFETY (DPS) OFFICE OF HOMELAND SECURITY (OHS): FIRE PROTECTION ENTITIES REQUIREMENTS

Fire Protection entities MUST be compliant with the following statutes:

Section <u>320.271 RSMo</u> – Fire Department Registration Pursuant to section 320.271 RSMo, All fire protection districts, fire departments, and all volunteer fire protection associations as defined in section 320.300 shall complete and file with the state fire marshal within sixty days after January 1, 2008, and annually thereafter, a fire department registration form provided by the state fire marshal.

#### MISSOURI DEPARTMENT OF PUBLIC SAFETY (DPS) OFFICE OF HOMELAND SECURITY (OHS): EMERGENCY MEDICAL SERVICE PROVIDERS REQUIREMENTS

#### Emergency Medical Service Providers MUST be compliant with the following statutes:

#### Section 190.105 RSMo – Ambulance License

Pursuant to section 190.105 RSMo, No person, either as owner, agency or otherwise, shall furnish, operate, conduct, maintain, advertise, or otherwise be engaged in or profess to be engaged in the business or service of the transportation of patients by ambulance in the air, upon the streets, alleys, or any public way or place of the state of Missouri unless such person holds a currently valid license from the department for an ambulance service pursuant to the provisions of sections <u>190.001 RSMo to</u> <u>190.245 RSMo</u>.

Section 190.133 RSMo – Emergency Medical Response Agency License

Pursuant to section <u>190.133(4)</u> RSMo, No person or entity shall hold itself out as an emergency medical response agency that provides advanced life support or provide the services of an emergency medical response agency that provides advanced life support unless such person or entity is licensed by the state of Missouri Department of Health and Senior Services.

#### MISSOURI DEPARTMENT OF PUBLIC SAFETY (DPS) OFFICE OF HOMELAND SECURITY (OHS): LAW ENFORCEMENT REQUIREMENTS

#### Law enforcement agencies MUST be compliant with the following statutes:

Section 590.650 RSMo – Vehicle Stops Report

The subrecipient assures, where the project agency is a law enforcement agency, its law enforcement agency is in compliance with the state provisions of Section 590.650 RSMo relating to vehicle stop reporting and will remain in full compliance for the duration of the project period.

Section 590.700 RSMo – Written Policy on Recording Custodial Interrogations

The subrecipient assures, where the project agency is a law enforcement agency, its law enforcement agency is in compliance with the state provisions of Section 590.700 RSMo relating to custodial interrogations and has adopted a written policy to record custodial interrogations of persons suspected of committing or attempting to commit the felony crimes described in subsection 2 of this section.

Section 43.544 RSMo – Written Policy on Forwarding Intoxication-Related Traffic Offenses

Subrecipients that are a law enforcement agency, assure its agency is in compliance with the state provisions of Section 43.544 RSMo relating to forwarding intoxication-related offenses and has adopted a written policy to forward arrest information for all intoxication-related traffic offenses to the central repository as required by Section 43.503 RSMo.

#### MISSOURI DEPARTMENT OF PUBLIC SAFETY (DPS) OFFICE OF HOMELAND SECURITY (OHS): LAW ENFORCEMENT REQUIREMENTS

Section 590.1265 RSMo – Police Use of Force Transparency Act of 2021

The subrecipient assures, where the project agency is a law enforcement agency, its law enforcement agency is in compliance with the state provisions of Section 590.1265 RSMo relating to use of force incidents reporting standards and procedures, and publication of report data, analysis report. Law enforcement agencies will be considered non-compliant if they have not submitted Use of Force reports for three or more month in the prior twelve month period. The subrecipient must remain compliant with section 590.1265 RSMo for the duration of the grant period of performance.

#### Section 43.505 RSMo – National Incident-Based Reporting System (NIBRS)

The subrecipient assures, where the project agency is a law enforcement agency, its law enforcement agency is in compliance with the state provisions of Section 43.505 RSMo which states each law enforcement agency is required to submit crime incident reports to the Department of Public Safety on forms or in the format prescribed by the department, and submit any other crime incident information which may be required by the Department of Public Safety. Agencies that are not compliant at the time of application will only be eligible to apply for grant funds to assist the agency in becoming compliant with Section 43.505 RSMo. Law enforcement agencies will be considered non-compliant if they have not submitted MIBRS reports for three or more months in the prior twelve month period. The subrecipient must remain compliant with section 43.505 RSMo for the duration of the grant period of performance.

#### Section 590.030 RSMo – Rap Back Program Participation

The subrecipient assures, where the project agency is a law enforcement agency, its law enforcement agency is in compliance with the state provisions of Section 590.030 RSMo. The law enforcement agency shall enroll in the state and federal Rap Back programs on or before January 1, 2022 and will continue to remain enrolled. The law enforcement agency shall take all necessary steps to maintain officer enrollment for all officers commissioned with that agency in the Rap Back programs. An officer shall submit to being fingerprinted at any law enforcement agency upon commissioning and for as long as the officer is commissioned with that agency.

### MISSOURI DEPARTMENT OF PUBLIC SAFETY (DPS) OFFICE OF HOMELAND SECURITY (OHS): EQUIPMENT REQUIREMENTS

Interoperability Equipment (Portables/Handhelds, Mobiles, Repeaters, Base Stations, etc.)

Investments in emergency communications systems and equipment must meet applicable <u>SAFECOM Guidance</u>. All radios must meet the Missouri Department of Public Safety (DPS), Office of the Director, DPS Grants <u>Radio Interoperability Guidelines</u>.

### MISSOURI OFFICE OF HOMELAND SECURITY: MATCH REQUIREMENTS

- 50% Match Requirement amount listed on Subaward Agreement
  - Cash (Hard)
  - In-Kind (Soft)
    - Can be retroactive to March 2020
    - CANNOT be utilized to fulfill match requirement on any other Federal grant

## **PROCUREMENT REQUIREMENTS**

With any expenditure, the subrecipient must ensure that:

- The expenditure is an approved budget line item
  - Reimbursements will NOT be made for items that are not an approved budget line item at the time of purchase
- Prior approval has been obtained, if necessary
- Sufficient funds are in the approved budget line
- Subrecipients must have their own written procedures for determining costs are allowable, reasonable, allocable and necessary in accordance with Subpart E –Cost Principles and the terms and conditions of the Federal award (<u>2 CFR Part 200.302 (7)</u>). Agencies that do not have their own written policy, may adopt the DPS/OHS' Appendix B found in the Administrative Guide for Homeland Security Grants

If a subrecipient is uncertain as to whether a cost meets these requirements, please contact the DPS/OHS for clarification

## **PROCUREMENT REQUIREMENTS**

- Subrecipient must follow their agency's procurement policy unless the State of Missouri policy is more restrictive
- If the subrecipient does not have a procurement policy, they must follow the State of Missouri procurement policy
- State of Missouri Revised Statutes Chapter 34, State Purchasing and Printing
- Missouri Rules of Office of Administration Division 40 Purchasing and Materials Management
- Cooperative Procurement Option
  - State Contracts
  - NASPO
  - GSA
  - Sourcewell
  - Other cooperative contracts

\*\*If utilizing a cooperative contract, procurement documents (quotes/bids) and invoice(s) must reference the contract utilized\*\*

## **PROCUREMENT REQUIREMENTS**

#### State of Missouri Procurement Guidelines

Less than \$10,000	\$10,000 - \$99,999	Greater than \$100,000
Purchase with prudence on the open market	<ul> <li>Must be competitively bid</li> <li>Informal method is acceptable</li> <li>Minimum of 3 bids/quote</li> <li>Ex. Telephone quote, online pricing, request for quotation</li> </ul>	<ul> <li>Formal solicitation required</li> <li>Advertised in at least two daily newspapers for general circulation at least 5 consecutive days before bids are to be opened</li> <li>May also advertise in at least 2 weekly minority newspapers &amp; provide through an electronic medium available to general public</li> <li>Post a notice in a public area of your office</li> <li>Solicit by mail or other reasonable methods generally available to the public</li> <li>OHS must approve if less than 3 bids received</li> </ul>

A single feasible source procurement of \$10,000.00 or more requires prior approval from the DPS/OHS \*\*Brand names should not be specified when seeking bids/quotes\*\*

## SINGLE FEASIBLE SOURCE

- Use of a single feasible source procurement of \$10,000.00 or more requires prior approval from the DPS/OHS.
- Single feasible source form can be located on the DPS website in the <u>Grant Applications and</u> <u>Forms</u> section
- If purchase is made using a single feasible source without prior approval, DPS/OHS has the right to refuse reimbursement

Non-compliance could result in the agency being listed as high risk



### SINGLE FEASIBLE SOURCE

Use of single feasible source procurement is discouraged. A single feasible source procurement exists when:

- The item is available only from a single source; or
- The public exigency or emergency for the requirement will not permit a delay resulting from competitive solicitation; or
- The Missouri Department of Public Safety (DPS) Office of Homeland Security (OHS) expressly authorizes noncompetitive proposals in response to a written request from the local agency; or

After solicitation of a number of sources, competition is determined inadequate

## WHO AREYOU DOING BUSINESS WITH?

- Subrecipients are required to verify that vendors used for grant purchases are not on either the Federal Excluded Parties List System (EPLS) or State Suspended/Debarred Vendors List
  - Federal System for Award Management
  - State of Missouri Office of Administration

\*Maintain a copy of a screenshot in the grant file to verify this was completed\*



### **PRIOR APPROVAL**

Some items require prior approval from the DPS/OHS, including, but not limited to:

Single Feasible Source over \$10,000

### **AUDIT REQUIREMENTS**

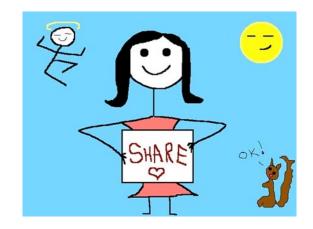
- State and local units of government, institutions of higher education, and other nonprofit institutions, must comply with the organizational audit requirements of <u>2 CFR Part 200 Subpart F</u>, Audit Requirements
  - Subrecipients who expend \$750,000 or more of federal funds during their fiscal year are required to submit a single organization wide financial and compliance audit report (single audit) to the <u>Federal Audit Clearinghouse</u> within 9 months after the close of each fiscal year during the term of the award
    - Expended funds include all Federal funds, not just ARPA SLFRF CIIEG funds

- Equipment is defined as tangible, personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost of \$1,000 or more
- Entities may have a lower acquisition cost in their procurement policy. If so, they MUST use the most stringent policy

All equipment purchased with ARPA SLFRF CIIEG funds MUST be tagged
 All tags must state:

Purchased with U.S. Department of Treasury Funds

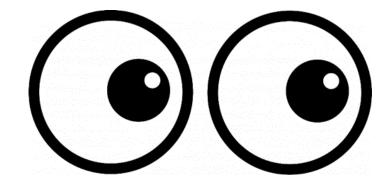
- Equipment must be used in the program or project it was acquired for as long as needed
- During the time that equipment is used on the project or program for which it was acquired, the non-Federal entity must make the equipment available for use on other projects or programs currently or previously supported by the Federal government, provided the use will not "interfere" with the work on the project or program for which it was originally acquired



- When no longer needed, the equipment may be used in other activities supported by the Federal awarding agency, in the following priority:
  - Activities from the Federal awarding agency, which funded the original project
  - Activities under Federal awards from other Federal awarding agencies
- When acquiring replacement equipment, the non-Federal entity may use the equipment to be replaced as a trade in or sell the property and use the proceeds to offset the cost of the replacement property

#### Subrecipients MUST:

- Have an inventory management system and maintain effective control
- Have a control system in place to prevent loss, damage and theft
- Investigate all incidents
- Have adequate maintenance procedures to keep property in good condition



#### Equipment must be protected against loss, damage and theft

- Per <u>2 CFR 200.310</u>: The non-Federal entity must, at a minimum, provide the equivalent insurance coverage for real property and equipment acquired or improved with Federal funds as provided to property owned by the non-Federal entity
- Investigate all incidents of loss, damage, theft, and report to the DPS/OHS within 30 days of the incident
- Equipment must be maintained to keep it in mission capable (operational) condition

- Required to maintain inventory form for all equipment purchased with ARPA SLFRF CIIEG funds
- Equipment is added to DPS/OHS inventory at the time of claim approval
- Physical inventory MUST be taken and results reconciled once every two years
  - Next inventory will be due October 1, 2026
  - DPS/OHS will send list of your agency's inventory for verification



#### Equipment inventory MUST be one item per line and include the following:

- Region
- County
- Fiscal Year
- Grant Program
- Grant Award Number
- Description of Equipment
- EGMS/WebGrants Line Item Number
- Manufacturer
- Model
- Identification number
- Title holder
- Quantity

- Individual Item Cost
- % of Federal Participation in the Cost
- Date of Delivery
- Physical Location (MUST be the physical address)
- Use (Local, Regional, National, Statewide)
- Readiness Condition (Mission Capable/Not Mission Capable)
- Final Disposition
- Date of Final Disposition
- Final Disposition Sale Price
- Contact Name
- Contact Email
- Contact Phone Number

- When original or replacement equipment acquired with ARPA SLFRF CIIEG funds is no longer needed for the original project or program, the equipment may be retained, sold, or disposed, if it is not needed in any other ARPA SLFRF CIIEG sponsored project or program
- Disposition requests should be submitted on a timely basis. Disposition requests should not be held and submitted for approval at the time of the bi-annual physical inventory

- Subrecipients must request approval from the DPS/OHS prior to disposing of equipment. Procedures in the OHS Administrative Guide for Homeland Security Grants must be followed to request equipment disposition approval. Email the Equipment Disposition Forms to Kelsey Saunders at <u>Kelsey.Saunders@dps.mo.gov</u>
- A copy of the approved Equipment Disposition Form must be maintained in the subrecipient grant file
- Equipment Disposition Form found on the DPS/OHS website in the Grant Applications and Forms section

- Equipment with a per item fair market value of less than \$5,000 may be retained, sold, or disposed with no further obligation when approval is given by DPS/OHS
- Equipment with a per item fair market value of \$5,000 or more may be retained or sold



- If sold, the Federal awarding agency is entitled to an amount calculated by multiplying the current market value or proceeds from the sale by the Federal awarding agency's percentage of participation
  - Example: Agency X wants to sell their 2009 FI50, which was 50% funded with ARPA SLFRF CIIEG funds and 50% funded with local funds. The fair market value for their 2009 FI50 was \$6,000.00. The Federal awarding agency would be entitled to \$3,000.00 of the proceeds and the local agency would be entitled to \$3,000.00



### WEBGRANTS SYSTEM

### **WEBGRANTS**

Login to the WebGrants using the same User ID and Password used when

submitting the application

1 Enter your user id and	Ipassword
User ID	
Password	
SIG	N IN
Forgot User ID?	Reset Password?



#### 2-Factor Authentication

#### Verify Email Address

Please check the email account for the email address provided in your registration.

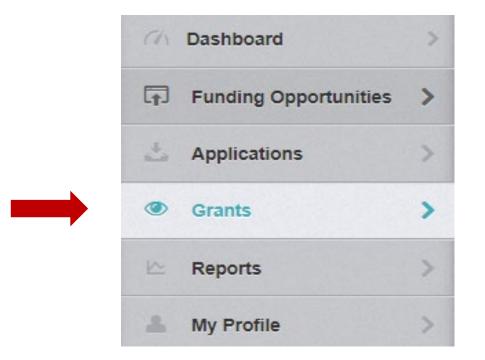
You should receive an email with a temporary passcode. Please enter that passcode below

Enter your Passcode

Submit

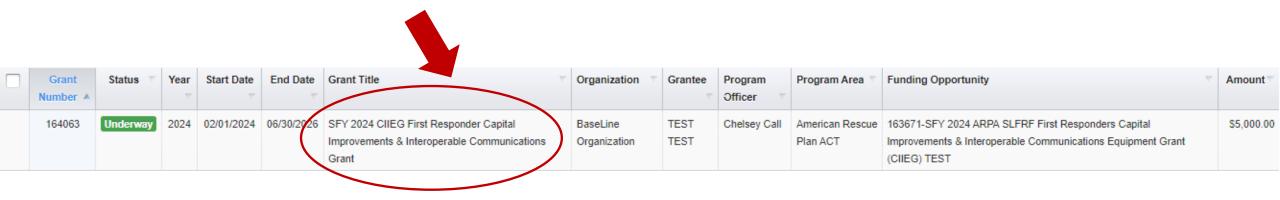
### **WEBGRANTS**

Select "Grants"



#### **WEBGRANTS**

Select project titled "SFY 2024 American Rescue Plan Act (ARPA) State and Local Fiscal Recovery Funds (SLFRF) First Responder Capital Improvements & Interoperable Communications Equipment Grant (CIIEG)"



# WEBGRANTS

## Grant Components

### 🔳 Grant Components

Component	Form Type / Source / Secu
General Information	0 0 C
Contact Information - FREG / CIIEG	Z @ 🗹
Budget	P 👁 🕑
Claims	🗎 🌣 🔒
Correspondence	Ö Ö 🔒
Subaward Adjustments	🗎 🌣 🔒
Status Reports	🗎 🌣 🔒
Attachments	🗹 👁 🔒
Project Package - CIIEG	🗹 👁 🕑
Subaward Documents - Final	🗹 👁 🕑
Appropriations	¢ ¢ 🔒
Named Attachments - CIIEG	🗹 👁 🕑
Closeout	🗹 👁 🕑
Funding Opportunity	🗎 🔸 🗹
Application	🗎 🔸 🕑

## **WEBGRANTS**

General Information Component

Displays general information about the grant

- Grant Title title of the grant project as listed on the Subaward Agreement
- Grant Status Awarded/Underway/Closed
- Grantee Organization organization funds were awarded to
- Grantee Contact main grant contact from your agency
- Additional Grantee Contacts additional grant contacts from your agency
- Program Officer DPS/OHS Grants Supervisor
- Additional Internal Contacts DPS/OHS Grants Specialist
  - This is your main DPS/OHS contact on the project
- Program Area grant program
- Subaward Number grant award number as listed on the Subaward Agreement
- Award Year year of the grant program
- Subaward Dates dates the Subaward Agreement was sent and fully executed
- Project Dates grant period of performance dates

## WEBGRANTS

### **General Information**

Grant Title:	SFY 2024 CIIEG First Responder Capital Improvements & Interoperable Communications Grant
Grant Status:	Underway
Grantee Organization:	BaseLine Organization
Grantee Contact:	TEST TEST
Additional Grantee Contacts:	
Program Officer:	Chelsey Call
Additional Internal Contacts:	Joanne Talleur, Maria Robinett
Program Area:	American Rescue Plan ACT
Subaward Number:	164063
Award Year:	2024
Subaward Dates:	07/31/2024 07/31/2024 08/09/2024 08/09/2024 Contract Sent Contract Received Contract Legal Contract Executed
Project Dates:	02/01/2024 06/30/2026 Start Date End Date
Comments:	

## SUBAWARD AGREEMENT

- Fully-executed Subaward Agreement is located in Subaward Documents – Final Component
  - Maintain the Subaward Agreement in your grant file

#### i Grant Components

#### The grant forms appear below.

Your grant award details are saved here, as well as many forms which may be used to manage your grant.

Componer	nt
General In	formation
Contact In	formation - FREG / CIIEG
Budget	
Claims	
Correspon	dence
Subaward	Adjustments
Status Rep	ports
Attachmer	its
Project Pa	ckage - CIIEG
Subaward	Documents - Final
Named Att	achments - CIIEG
Closeout	
Funding O	pportunity
Applicatio	n

Approved budget is located in Budget Component

- Be sure to review approved budget before beginning procurement
- Ensure you are only purchasing items that are on approved budget
- Ensure you are purchasing the quantity of items that is on approved budget
- Ensure the goods/services you are purchasing are within the grant period of performance (including licenses)
  - If license spans outside the period of performance, costs will be prorated for those that fall within the period of performance
- Request Subaward Adjustment if need to make changes to budget (i.e. change in quantity)

#### E Grant Components

The grant forms appear below.

Your grant award details are saved here, as well as many forms which may be used to manage your grant.

	Component						
	General Information						
	Contact Information - FREG / CIIEG						
<	Budget						
	Claims						
	Correspondence						
	Subaward Adjustments						
	Status Reports						
	Attachments						
	Project Package - CIIEG						
	Subaward Documents - Final						
	Named Attachments - CIIEG						
	Closeout						
	Funding Opportunity						
	Application						

#### Equipment - Multi-List

All equipment items are defined as tangible property having an acquisition cost of \$1,000 or more, and a useful life of more than one year.

Equipment quotes may be uploaded in Named Attachment component of the application.

Line Item Code	Item Name	Quantity	Unit Cost	Total Cost	Local Match Amount	Type of Match	Federal Amount
10001	10001 Mobile Radios	2.00	\$6,000.00	\$12,000.00	\$6,000.00	Cash	\$6,000.00
				\$12,000.00	\$6,000.00		\$6,000.00

Last Edited By: Chelsey Call - Sep 4, 2024 12:14 PM

#### Interview State St

Provide separate justifications for each line item being requested. Address why the requested item is necessary for the success of the proposed project. Indicate who will use the item, how the item will be used and where the item will be housed. Also provide a cost basis for the amount requested. For example: (3 mobile radios @ \$5,500.00 each). Please Note: Per the Missouri Department of Public Safety Radio Interoperability Guidelines, a quote is required for all radio interoperability equipment.

Please provide justification for the 50% match requirement. If utilizing cash match, provide the source of the cash. If utilizing in-kind match, describe the source and how it directly relates to the project.

Mobile Radios: 2 Mobile Radios at \$6,000.00 each = \$12,000.00. Cash match will be utilized. 5000 Character Limit

- Project Period of Performance: February 1, 2024 to June 30, 2026
- Funds must be obligated by December 31, 2024
  - Funds are considered "obligated" when a legal liability to pay a determinable sum for services or goods is incurred and will require payment during the same or future period (Goods/Services are purchased)

## Funds must be expended by June 30, 2026

- Funds are considered "expended" when payment is made (Payment has been made for goods/services)
- Funds must be submitted for reimbursement within 45 days following the project period of performance by August 14, 2026

Information Bulletin 5: Policy on Reimbursement Requests discusses requirements for reimbursement requests

CLAIMS

|O|

- Must incur an allowable expense, make payment, and seek reimbursement within 6 months of the invoice date
- Supporting documentation must be submitted with each claim
  - Must be in one attachment and in the same order as the Expenditures Form on the reimbursement request in WebGrants
- In the Expenditure Form in WebGrants, a line must be completed for each individual expenditure
- Multiple invoices on one expenditure line will not be accepted. However, each item purchased on an invoice does not need to be listed separately unless the items are on a different line in the approved budget
- Incomplete claims could result in a delay of payment. It is the requesting agency's responsibility to complete the necessary changes

### Equipment Supporting Documentation

Equipment means tangible personal property (including information technology systems) having a useful life of more than one year and <u>a per-unit acquisition cost</u> which equals or exceeds the lesser of the capitalization level established by the non-Federal entity for financial statement purposes, or <u>\$1,000</u>

- Claim in WebGrants
- Vendor Invoice
- Proof of payment (i.e., copy of cancelled check, credit card statement, bank statement)
- Proof of delivery/completion (i.e., signed packing slip, receipt, or signed statement in writing indicating items delivered)
- Purchase order, if one was created or referenced on an invoice
- Equipment Inventory Form in WebGrants must be completed for each piece of equipment
  - If you purchased more than one of the same item, they must be listed separately on the equipment inventory form

## Supplies Supporting Documentation

- Claim in WebGrants
- Vendor Invoice
- Proof of Payment (i.e., copy of cancelled check, credit card statement, or bank statement)
- Proof of delivery/completion (i.e., signed packing slip, receipt, or signed statement in writing indicating items delivered)

## In-Kind Match Supporting Documentation

- Proof of expense (vendor invoice/salary documentation/fringe benefit documentation, etc.)
- Proof of payment (copy of cancelled check, credit card statement, bank statement, payroll journal, check stub, etc.)
- Proof of delivery (signed statement in writing indicating goods/services received, signed packing slip, timesheets)

### Advance Payment

- Information Bulletin 2: Policy on Advance Payment and Cash Advances discusses requirements for advance payment requests
- Advance payment is defined as funds given to a subrecipient in advance of the subrecipient incurring the debt. For example, if a subrecipient orders a piece of equipment and requests reimbursement prior to paying the vendor's invoice, receipt of funds would be considered an advance payment
- Will not provide advance payment to a subrecipient before costs have been incurred through an invoice from a vendor
  - Some situations, local cash flow makes payment for large equipment items difficult
  - DPS/OHS has agreed to accept requests for funds from subrecipients as soon as a vendor submits their invoice and the subrecipient has received goods or services
- \$2,500 minimum for subrecipients requesting a reimbursement with an advance payment

### Advance Payment Supporting Documentation

- Claim in WebGrants
- Vendor Invoice
- Proof of delivery/completion (i.e., signed packing slip, receipt, or signed statement in writing indicating items delivered)
- Completed Equipment Detail Form in WebGrants, if applicable
- Required to submit proof of payment (i.e., copy of cancelled check, credit card statement, or bank statement) to the DPS/OHS within 30 days from receipt of payment
- To request, will type "Advance Payment" in the Check/EFT Number and Check/EFT Date fields in the WebGrants claim

## Submitting a claim in WebGrants

 Select "Claims" component in WebGrants

I Grant Components
The grant forms appear below.
Your grant award details are saved here, as well as many forms which may be used to manage your grant.
Component
General Information
Contact Information - FREG / CIIEG
Budget
Claims
Correspondence
Subaward Adjustments
Status Reports
Attachments
Project Package - CIIEG
Subaward Documents - Final
Named Attachments - CIIEG
Closeout
Funding Opportunity
Application

### Select "Add Claim"

#### 164063 - SFY 2024 CIIEG First Responder Capital Improvements & Interoperable Communications Grant - 2024

Status:	Underway	
Program Area:	American Rescue Plan ACT	
Funding Opportunity:	163671-SFY 2024 ARPA SLFRF First Responders Capital Improvements & Interoperable Communications Equipment Grant (CIIEG) TEST	
Organization:	BaseLine Organization	
Grantee Contact:	TEST TEST	
Program Officer:	Chelsey Call	-
Awarded Amount:	\$10,500.00	
Grant List Genera Contac Budget Claims	Corres Subawa Status Attach Projec Subawa Approp Named Closeo	Ø Notes (0) ♣ Add Claim
ID 🔺 Type 🔽 Status	Start Date     End Date     Last Submitted Date     Paid Date	Claim Amount
	No data available in table	
	Submitted Amount:	\$0.00
	Approved Amount:	\$0.00
	Awaiting Payment Amount:	\$0.00
	Paid Amount:	\$0.00
	Total Amount:	\$0.00

## Complete Claim General Information

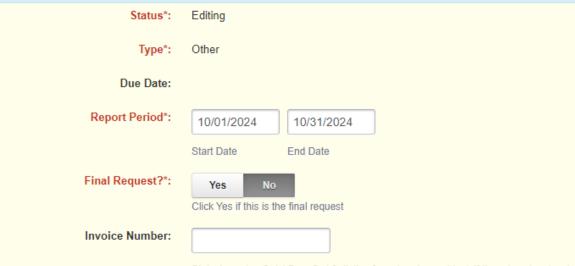
- Claim Type Select "Other" in the drop-down
- Reporting Period Enter the date range for the expenses being requested
- Invoice Number Leave field blank
- Is this your Final Report
  - Select "Yes" if this is your last claim
  - Select "No" if this is not your last claim
- Select "Save"

### General Information - Claim - Edit

Save Form

In the form below, complete all required fields. Enter the report period of coverage for this claim. All expenses reported on this claim should have been incurred during this period of time. If this is the last claim that will be submitted for this grant, then the Final Request checkbox should be checked.

Examples Quarterly Reporting Period: 1/1 - 3/31, 4/1 - 6/30, 7/1 - 9/30, and 10/1 - 12/31



State Agencies Only! Drop first 3 digits of number. Leave blank if there is not an invoice number!

- Complete all Claim Components
  - Detail of Expenditure
  - Equipment Inventory
  - Other Attachments
- All components must be marked "Complete" in order to submit the claim



-			
Claim: 001			
Claim Status:	Editing		
Grant Title:	164063 - SFY 2024 CIIEG First Responder Capital Improvem	ents & Interoperable Communications Grant	
Program Area:	American Rescue Plan ACT		
Funding Opportunity:	163671-SFY 2024 ARPA SLFRF First Responders Capital Im	provements & Interoperable Communications Equipment Grant (CIIEG) TEST	
Reporting Period:	10/01/2024 - 10/31/2024		
Claim Type:	Other		
Submitted By:			
Claim Preview Attachments Alert History           Image: Claim Details           Claim cannot be Submitted Currently           • Claim components are not complete	Мар		Q. Preview Claim
Component	Complete?	Last Edited	
General Information	✓	Sep 4, 2024 12:28 PM - TEST TEST	
Detail of Expenditure		Sep 3, 2024 7:42 AM - Chelse Dowell	
Equipment Inventory		Jul 2, 2024 3:19 PM - Joanne Talleur	
Other Attachments			

### Select "Detail of Expenditure"

Olaim Details			Q Preview Claim
Claim cannot be Submitted Currently <ul> <li>Claim components are not complete</li> </ul>			
Component	Complete?	Last Edited	
General Information	~	Sep 4, 2024 12:28 PM - TEST TEST	
Detail of Expenditure		Sep 3, 2024 7:42 AM - Chelse Dowell	
Equipment Inventory		Jul 2, 2024 3:19 PM - Joanne Talleur	

## REIMBURSEMENT REQUESTS (CLAIMS) CASH MATCH

Select "Add Row" for each expenditure in the corresponding budget category for the item that is being requested for reimbursement (<u>Note: In-Kind Match will also be added as an expenditure</u>)

For Example:

If the item you are requesting for reimbursement is located in the Equipment category of your budget, you will select "Add Row" under Equipment

🔳 Equipment - N	Equipment - Multi-List									+ Add Row		
All equipment items are defined as tangible property having an acquisition cost of \$1,000 or more, and a useful life of more than one year.												
Equipment quotes may	be upload	ed in Named Attac	chment comp	onent of the ap	plication	L.						
Budget Line Label	Payee	Description	Quantity	Unit Cost	Total	Expense Federal Total	Federal Amount Requested	Match Total	Invoice #	Invoice Date	Check/EFT	Check/EFT Date
No Data for Table												

If the item you are requesting for reimbursement is located in the Supplies/Operations category for your budget, you will select "Add Row" under Supplies/Operations



# REIMBURSEMENT REQUESTS (CLAIMS) CASH MATCH

#### Equipment

All equipment items are defined as tangible property having an acquisition cost of \$1,000 or more, and a useful life of more than one year.

Equipment quotes may be uploaded in Named Attachment component of the application.

Budget Line Label:	
Budget Line*:	Equipment-10001 Mobile Radios
Payee*:	Vendor Name
Description*:	Description of Item Purchased
Quantity*:	2
Unit Cost*:	6000.00
Total:	
Expense Federal Total:	
Federal Amount Requested:	6000.00
Match Amount Claimed:	
Invoice #*:	12345
Invoice Date*:	10/15/2024
Check/EFT*:	5678
Check/EFT Date*:	10/21/2024

The example on the slide is demonstrating expenses entered if cash match is being utilized

Save Row

 Select "Save Row" when complete

# REIMBURSEMENT REQUESTS (CLAIMS) IN-KIND MATCH

Equipment	Save Row
All equipment items are defined as tangible prope	erty having an acquisition cost of \$1,000 or more, and a useful life of more than one year.
Equipment quotes may be uploaded in Named At	tachment component of the application.
Budget Line Label:	
Budget Line*:	Equipment-10001 Mobile Radios
Payee*:	Vendor Name
Description*:	Description of Item Purchased
Quantity*:	2
Unit Cost*:	6000.00
Total:	
Expense Federal Total:	
Federal Amount Requested:	12000.00
Match Amount Claimed:	
Invoice #*:	12345
Invoice Date*:	10/15/2024
Check/EFT*:	5678
Check/EFT Date*:	10/21/2024

- The example on the slide is demonstrating expenses entered if in-kind match is being utilized
- If you are using in-kind match, you will have two expenditure entries
  - Expenditure entry for the item purchased
  - Expenditure entry for the inkind item
- This screenshot shows an expenditure entry for the item that you have purchased
  - Federal amount requested will be the full purchase price
  - Select "Save Row"

# REIMBURSEMENT REQUESTS (CLAIMS) IN-KIND MATCH

Equipment		Save Row								
All equipment items are defined as tangible prop	All equipment items are defined as tangible property having an acquisition cost of \$1,000 or more, and a useful life of more than one year.									
Equipment quotes may be uploaded in Named Attachment component of the application.										
Budget Line Label:										
Budget Line*:	Equipment-10002 Mobile Radios (In-Kind Match)									
Payee*:	Vendor Name									
Description*:	Description of Item Purchased									
Quantity*:	2									
Unit Cost*:	6000.00									
Total:										
Expense Federal Total:										
Federal Amount Requested:	0.00									
Match Amount Claimed:										
Invoice #*:	45678									
Invoice Date*:	04/01/2024									
Check/EFT*:	12345									
Check/EFT Date*:	04/09/2024									

This screenshot shows an expenditure entry for the item that is being used as your inkind match

- Federal amount requested will be zero.
- Select "Save Row"

- Line Number select the corresponding budget line for the item that is being requested for reimbursement
- Payee enter the name of the vendor that the item was purchased from
- Description enter a description of the item purchased
- Quantity enter the quantity of the item that was purchased
- Unit Cost Cost per item
- Federal Amount Requested Total amount of funds being requested from the Federal Government
- Invoice # vendor's invoice number
- Invoice Date date on vendor's invoice
- Check/EFT Number
  - Check number used for payment to vendor OR EFT number for payment to vendor
  - Advance Payment
- Check/EFT Date
  - Date of check used for payment to vendor **OR** Date of EFT for payment to vendor
  - Advance Payment

## Select "Add" to add additional expenditures to the claim

Select "Mark as Complete" after all expenditures have been added

 Equipment Multilliet	÷.
Equipment - Multi-List	

All equipment items are defined as tangible property having an acquisition cost of \$1,000 or more, and a useful life of more than one year.

Equipment quotes may be uploaded in Named Attachment component of the application.

Budget Line Label	Payee	Description	Quantity	Unit Cost	Total	Expense Federal Total	Federal Amount Requested	Match Amount Claimed	Invoice #	Invoice Date	Check/EFT	Check/EFT Date
Equipment-10001 Mobile Radios	Vendor Name	Description of Item Purchased	2.00	\$6,000.00	\$12,000.00	\$6,000.00	\$6,000.00	\$6,000.00	12345	10/15/2024	5678	10/21/2024
					\$12,000.00		\$6,000.00	\$6,000.00				
					\$12,000.00		\$6,000.00	\$6,000.00				

Mark as Complet

Add Rov

## REIMBURSEMENT REQUESTS (CLAIMS) CASH MATCH

Verify the amounts entered on the Detail of Expenditure section have been transferred to the Reimbursement section correctly

Select "Mark as Complete"

Cash match example:

Budget Category	Details	Subaward Budget	Expenses This Period	Prior Expenses (Paid)		Available Balance (Unpaid)	Subaward Match	Match Expenses This Period	Prior Match Expenses	Total Match	Remaining Match Requirement	Match Percentage	Total Claim Amount
Personnel													
		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	.00%	\$0.00
Personnel Benefits													
		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	.00%	\$0.00
Travel													
		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	.00%	\$0.00
Equipment													
10001 Mobile Radios	10001	\$6,000.00	\$6,000.00	\$0.00	\$6,000.00	\$0.00	\$6,000.00	\$6,000.00	\$0.00	\$6,000.00	\$0.00	50.00%	\$12,000.00
		\$6,000.00	\$6,000.00	\$0.00	\$6,000.00	\$0.00	\$6,000.00	\$6,000.00	\$0.00	\$6,000.00	\$0.00	50.00%	\$12,000.00

### I Reimbursement



✓ Mark as Complete

## REIMBURSEMENT REQUESTS (CLAIMS) IN-KIND MATCH

Verify the amounts entered on the Detail of Expenditure section have been transferred to the Reimbursement section correctly

Select "Mark as Complete"

## In-kind match example:

I Reimbursement

Budget Category	Details	Subaward Budget	Expenses This Period	Prior Expenses (Paid)	Total	Available Balance (Unpaid)	Subaward Match	Match Expenses This Period	Prior Match Expenses	Total Match	Remaining Match Requirement	Match Percentage	Total Claim Amount
Personnel													
		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	.00%	\$0.0
Personnel Benefits													
		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	.00%	\$0.0
Travel													
		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	.00%	\$0.0
Equipment													
10001 Mobile Radios	10001	\$12,000.00	\$12,000.00	\$0.00	\$12,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%	\$12,000.0
10002 Mobile Radios (In-Kind Match)	10002	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12,000.00	\$12,000.00	\$0.00	\$12,000.00	\$0.00	100.00%	\$12,000.0
		\$12,000.00	\$12,000.00	\$0.00	\$12,000.00	\$0.00	\$12,000.00	\$12,000.00	\$0.00	\$12,000.00	\$0.00	50.00%	\$24,000.0

✓ Mark as Comple

- Select "Equipment Inventory" Claim Component
- Select "Yes" if you have equipment within this reimbursement request (claim)
- Select "No" if you do NOT have equipment within this reimbursement request (claim)
- Select "Save Form"



- Select "Add Row" to add equipment items to the Equipment Detail
  - Each item needs to be entered on its own line
    - If you purchased two of the same item, there should be one line for each item
  - Complete all fields in the Equipment Detail
  - Verify Equipment Detail is correct and select "Mark as Complete"
- If no equipment is being requested for reimbursement, select "Mark as Complete"

ii Equi	Equipment Detail - Multi-List											✓ Mark as Complete			🛨 Add Row 🛛 Edit All Ro		All Rows				
Requesting Organization	Region	County	Year	Budget Line #	Manufacturer	Model	Description	Identification #(s)	Source of Funding	Title Holder	Date of Delivery	Quantity	Individual Item Costs	% of Federal Participation in the cost	Current Physical Location	Equipment Contact Person (ECP)	ECP Phone #	ECP E	Email Address		Readiness Condition
Baseline Organization	F	Cole	2024	10001	Motorola	APX 8500	Mobile Radio	1234567	ARPA SLFRF CIIEG	Baseline Organization	10/15/2024	1	\$6,000.00	50%	1101 Riverside Dr Jefferson City, MO 65101	John Smith	573- 999- 9999	John.S	Smith@hotmail.com	Regional	Mission Capable

- If equipment is requested, complete all fields in the Equipment Detail Form
- Requesting Organization Subrecipient's Organization
- Region Subrecipient's Region (MSHP Troop Boundaries)
- County Subrecipient's County
- Year Grant year the equipment was purchased (2024)
- Budget Line # Budget line number associated with the equipment
- Manufacturer Manufacturer of the equipment
- Model Model number of the equipment
- Description Description of the equipment (i.e., mobile radio)
- Identification # Unique identification numbers such as a serial number. (N/A should be annotated if there is not a unique identification number)
- Source of Funding Federal Funding utilized (ARPA SLFRF CIIEG)
- Title Holder Subrecipient Organization who owns the equipment

- Date of Delivery Date equipment was delivered
- Quantity Number of equipment items purchased (should only be one per line)
- Individual Item Costs Cost of individual equipment item
- > % of Federal Participation in the Cost Percentage of cost of the equipment that is being requested
- Current Physical Location Address where the equipment is located (P.O. Box is not a physical location for the inventory)
- Equipment Contact Person (ECP) Name of person to contact regarding equipment
- ECP Phone # Phone number for equipment contact person
- ECP Email Address Email address for equipment contact person
- Use Local, regional, statewide, or national. Progressive scale. If national use is entered, it is assumed it is available at all other levels
- Readiness Condition
  - Mission capable material condition of equipment indicating it can perform at least one and potentially all of its designated missions
  - Not mission capable material condition indicating that equipment is not capable of performing any of its designated mission

Select "Yes" to indicate documentation will be attached to the claim

Select "Save Form"



### Select "Add New Attachment"

Ø Other Attachme	nts - Other Attachments	✓ Mark as Complete	+ Add from Doc Repository	Add New Attachment	
Description	File Name	Туре	Size	Upload Date	Delete
		No files attached.			
				Last Edited By: Chelse	ey Call - Mar 4, 2024 12:14 PM

- Select file that is located on your computer
- Enter a description of the attachment
- Select "Save File"

Attach File					
Attach File				Save File	X Cancel
Upload File*:	Test File.docx	Change	Remove		
Description*:	Claim 1 Supporting Documentation				
	468 character(s) left				
	400 character(s) leit				

When all attachments have been added, select "Mark as Complete"



## When all Claim Components have been completed, select "Submit Claim" to submit the claim to DPS/OHS

Olaim Details			✓ Submit Claim 🗶 Withdraw 🍳 Preview Claim
Claim is in compliance and is ready for Submission!			
Component	Complete?	Last Edited	
General Information	✓	Sep 4, 2024 12:28 PM - TEST TEST	
Detail of Expenditure	$\checkmark$	Sep 4, 2024 2:40 PM - TEST TEST	
Equipment Inventory	$\checkmark$	Sep 4, 2024 2:44 PM - TEST TEST	
Other Attachments	✓	Sep 4, 2024 2:46 PM - TEST TEST	

- Information Bulletin 8: Policy on Budget and Program Revisions Subaward Adjustments discusses Subaward Adjustments
- Budget Modifications transfer among existing budget lines within the grant budget
  - Request for budget modification must be submitted through WebGrants as a Subaward Adjustment and <u>must</u> be approved by the DPS/OHS <u>prior</u> to the subrecipient obligating or expending the grant funds
  - Choose Budget Revision in the WebGrants System
- Program Modifications
  - Request for program modifications must be submitted through WebGrants as a Subaward Adjustment and must be approved by the DPS/OHS prior to the subrecipient obligating or expending the grant funds
  - Program modifications include:
    - Changes in subrecipient staff (Authorized Officials, Project Directors, or Fiscal Officers)
    - Address change or other information in the organization component of WebGrants
    - Request to change project period of performance
  - Choose Program Revision in the WebGrants System



- Scope of Work Changes
  - Adding new line items to the approved budget
  - Changes in quantity of an existing line item in approved budget
  - Changes to specifications of existing line item (i.e., an equipment line item on the approved budget lists a 12'x 20' tent, in order to purchase a tent that is 10' x 10' instead of the listed equipment, prior approval is required
  - Choose Budget Revision in the WebGrants System
- Request for scope changes must be submitted through WebGrants as a Subaward Adjustment and must be approved by the DPS/OHS prior to the subrecipient obligating or expending the grant funds

- Submitting a Subaward Adjustment in WebGrants
  - Select "Subaward Adjustments" component in WebGrants

	i≣ Grant Components
	The grant forms appear below.
	Your grant award details are saved here, as well as many forms which may be used to manage your grant.
	Component
	General Information
	Contact Information - FREG / CIIEG
	Budget
	Claims
	Correspondence
<	Subaward Adjustments
	Status Reports
	Attachments
	Project Package - CIIEG
	Subaward Documents - Final
	Named Attachments - CIIEG
	Closeout
	Funding Opportunity
	Application

#### Select "Add Amendment"

🖄 Subaward Adjustr	nents						Add Amendment
ID 🔺	Туре	Ŧ	Status	Title	τ.	Last Submitted Date	7

#### Complete General Information and select "Save Form"

General Information - Amend	ment - Edit	
In the form below, complete all required fields. S	select the appropriate amendment type and enter a short and concise title.	
Status*:		
Amendment Type*:	Budget Revision 🗸	
Title*:	Brief Title	

#### General Information

- Amendment Type choose the type of adjustment being requested
  - Budget Revision
  - Program Revision
- Title enter a brief title

- Complete all Subaward Adjustment Components by selecting each Component
  - Justification
  - Budget
  - Confirmation
  - Attachments



Select the "Justification" Component of the Subaward Adjustment

Amendment Preview Attachments Alert History Map					
Amendment Details		× Withdraw	街 Сору	<b>Q</b> Preview Amendment	
Amendment cannot be Submitted Currently <ul> <li>Amendment components are not complete</li> </ul>					
Component	Complete?	Last Edited			
General Information	~	Jul 3, 2024 9:43 AM - Joanne Talleur			
Justification					
Budget		-			
Confirmation		-			
Attachments		Jul 3, 2024 9:44 AM - Joanne Talleur			

#### Justification Component

- Explain the requested change and the reason for the requested adjustment
- Complete Subaward Adjustment Spreadsheet with requested changes for budget modification
  - Copy and paste Subaward Adjustment Spreadsheet into text box
  - Will be sent at conclusion of training
  - Select "Save Form"

Justification
Please explain the reason for the requested adjustment and include the effective date. State the need for the change and how the requested revision will further the objectives of the project. Justification:

#### Subaward Adjustment spreadsheet example

Line Number	Cu	urrent Federal Budget		Requested Change		Updated Federal Budget	Notes
10001	\$	50,000.00	\$	(10,000.00)	\$	40,000.00	Savings needed in another budget line of the project
10002	\$	2,000.00	\$	10,000.00	\$	12,000.00	Cost of equipment over original budget
	\$	52,000.00	\$		\$	52,000.00	
Line Number	Curre	ent Local Match Budget		<b>Requested Change</b>	ι	Updated Local Match Budget	Notes
10001	\$	50,000.00	\$	(1,000.00)	\$	49,000.00	Savings needed in another budget line of the project
10002	\$	2,000.00	\$	1,000.00	\$	3,000.00	Cost of equipment over original budget
	\$	52,000.00	\$	2	\$	52,000.00	
	C	Current Total Budget	S	um of Requested Change		Updated Total Budget	
	\$	104,000.00	\$		\$	104,000.00	
Current Federal Share	U	pdated Federal Share	C	urrent Local Match Share		Updated Local Match Share	
50%		50%		50%		50%	

#### Review "Justification Form" to ensure it is complete and accurate

Select "Mark as Complete"

#### Justification

Please explain the reason for the requested adjustment and include the effective date. State the need for the change and how the requested revision will further the objectives of the project.

✓ Mark as Complete

C Edit Form

Justification\*:

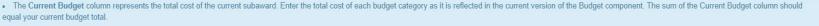
Explain the requested change and the reason for the requested adjustment.

Complete the Subaward Adjustment Spreadsheet and copy and paste into this text box.

#### 🖽 Budget - Edit

Select "Budget" for Budget Modifications

- Adjust the budget to mirror the complete old and new budget
- Make sure to update the Total Federal/State Share amounts
- The Total Local Match Share is 50% of the total cost
- Select "Save Grid"



• The Revised Amount column represents the requested, revised total cost of the budget as a result of the Subaward Adjustment. Therefore, enter the total cost of each budget category as it will be reflected in the revised version of the Budget component. The sum of the Revised Amount column should equal your revised budget total.

Current Budget	Revised Amount	Net Change
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
nefits \$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$10,000.00	\$9,000.00	\$-1,00 <mark>0.0</mark> 0
\$0.00	\$1,000.00	\$1,000.00
\$0.00	\$0.00	\$0.00
n \$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
Total \$0.00	\$0.00	\$0.00

#### I Federal/State and Local Match Share - Edit

• The Current Budget column represents the current subaward. Enter the total federal/state share and total local match share as it is reflected in the current version of the Budget component. The sum of the federal/state share and the local match share should equal the total of the Current Budget column above.

• The Revised Amount column represents the requested, revised total of the budget as a result of the Subaward Adjustment. Therefore, enter the total federal/state share and the total local match share as it will be reflected in the revised version of the Budget component. The sum of the federal/state share and the local match share should equal the total of the Revised Amount column above.

Row	Current Budget	Current Percent	Revised Amount	Revised Percent	Net Change
Total Federal/State Share	\$5,000.00	50.00%	\$5,000.00	50.00%	\$0.00
Total Local Match Share	\$5,000.00	50.00%	\$5,000.00	50.00%	S0.00



Save Grid

#### Ensure the "Budget" form is accurate and select "Mark as Complete"

Amend List Genera Justif Budget Co	onfir Attach	
Budget - Current Version	션 Create New V	ייי !≡ View Versions
Budget - Grid	✓ Mark as	Complete 🛛 Edit Grid

• The Current Budget column represents the total cost of the current subaward. Enter the total cost of each budget category as it is reflected in the current version of the Budget component. The sum of the Current Budget column should equal your current budget total.

• The Revised Amount column represents the requested, revised total cost of the budget as a result of the Subaward Adjustment. Therefore, enter the total cost of each budget category as it will be reflected in the revised version of the Budget component. The sum of the Revised Amount column should equal your revised budget total.

Row	Current Budget	Revised Amount	Net Change
Personnel	\$0.00	\$0.00	\$0.00
Personnel Benefits	\$0.00	\$0.00	\$0.00
Personnel Overtime	\$0.00	\$0.00	\$0.00
Personnel Overtime Benefits	\$0.00	\$0.00	\$0.00
Volunteer Match	\$0.00	\$0.00	\$0.00
Travel/Training	\$0.00	\$0.00	\$0.00
Equipment	\$10,000.00	\$9,000.00	\$-1,000.00
Supplies/Operations	\$0.00	\$1,000.00	\$1,000.00
Contractual	\$0.00	\$0.00	\$0.00
Renovation/Construction	\$0.00	\$0.00	\$0.00
Indirect Costs	\$0.00	\$0.00	\$0.00
Total	\$10,000.00	\$10,000.00	\$0.00

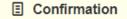
#### Select "Confirmation" Component

Amendment Preview Attachments Alert History Map					
Amendment Details					
Amendment cannot be Submitted Currently <ul> <li>Amendment components are not complete</li> </ul>					
Component	Complete?				
General Information	~				
Justification	<ul> <li>✓</li> </ul>				
Budget	$\checkmark$				
Budget Confirmation	<b>√</b>				

Complete with Authorized Official's Name, Title, and Date
Select "Save Form"

E Confirmation		Save Form
Your typed name as the applicant authorized official, in include your title, full legal name, and the current date.	lieu of signature, represents your legally binding acceptance of the terms	of this subaward adjustment and your statement of the veracity of the representations made in this subaward adjustment. You must
Authorized Official Name*:	Authorized Official's Name	
Title*:	Authorized Official's Title	
Date*:	10/15/2024	

#### Select "Mark as Complete"



✓ Mark as Complete 2 Edit Form

Your typed name as the applicant authorized official, in lieu of signature, represents your legally binding acceptance of the terms of this subaward adjustment and your statement of the veracity of the representations made in this subaward adjustment. You must include your title, full legal name, and the current date.

Authorized Official Name\*: Authorized Official's Name
Title\*: Authorized Official's Title
Date\*: 10/15/2024

#### Select "Attachments" form

Select "Yes" or "No" to indicate if you have any supporting documentation

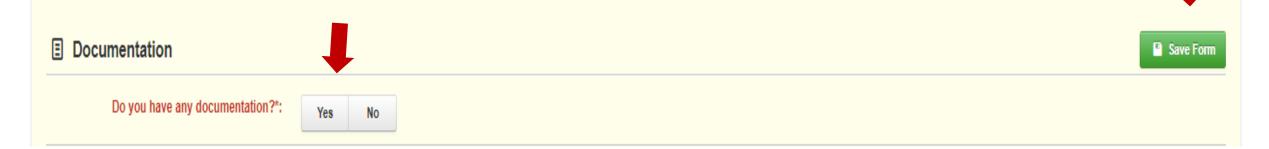
to attach

Attach Subaward Adjustment Spreadsheet

Attachments may also include new/updated quote and other pertinent

documentation

Select "Save Form"



#### Select "Add New Attachment"

Other Attachments - Other At	Other Attachments - Other Attachments       File Name [2]       Type		🗸 Mark as	Mark as Complete     Add from Doc Repository		+ Add New Attachment	
Description	File Name 🖸	Туре	Size		Upload Date	Delete	
		No files attached.					

- Save file that is located on your computer
- Enter brief description of document
- Select "Save File"

Attach File				Save File	× Cancel
Upload File*:	Test File.docx	Change	Remove		
Description*:	Subaward Adjustment Spreadsheet				
	469 character(s) left				

#### Select "Mark as Complete"

Other Attachments - Other Attachments				✓ Mark as Complete	+ Add New Attachment
Description	File Name 🖸	Туре	Size	Upload Date	Delete
subaward adjustment spreadsheet	Test adobe.pdf	pdf	32 KB	07/03/2024 09:44 AM	Delete
				Last Edited By: Joanne T	alleur - Jul 3. 2024 9:44 AM

After all Subaward Adjustment Components have been marked complete, select "Submit Amendment" to submit the Subaward Adjustment to the DPS/OHS

Amendment Preview Attachments Alert History Map						
Amendment Details			✓ Submit Amendment	× Withdraw	원 Сору	<b>Q</b> , Preview Amendment
Amendment is in compliance and is ready for Submission!						
Component	Complete?	Last Edited				
General Information	×	Jul 3, 2024 9:43 AM - Joanne Talleur				
Justification	~	Sep 4, 2024 2:53 PM - TEST TEST				
Budget	×	Sep 4, 2024 2:54 PM - TEST TEST				
Confirmation	~	Sep 4, 2024 2:55 PM - TEST TEST				
Attachments	~	Sep 4, 2024 2:58 PM - TEST TEST				

#### Status Report Due Dates

- January 10, 2025
   (July 1, 2024 December 31, 2024)
- July 10, 2025 (January 1, 2025 – June 30, 2025)
- January 10, 2026 (July 1, 2025 – December 31, 2025)
- August 14, 2026 Final Report (January 1, 2026 – June 30, 2026)
- To submit Status Report, select "Status Report" component in WebGrantS

#### Grant Components The grant forms appear below. Your grant award details are saved here, as well as many forms which may be used to manage your grant. Component General Information Contact Information - FREG / CIIEG Budget Claims Correspondence Subaward Adjustments Status Reports Attachments Project Package - CIIEG Subaward Documents - Final Named Attachments - CIIEG Closeout Funding Opportunity Application

Status Report with milestones has already been setup and is ready to update

#### Select Status Report that is due

Status Reports								Add Status Report
All status reports created for this grant appear below.								
ID 🔺	Туре	Status	Title	$\nabla$	Reporting Period	Due Date	Last Submitted Date	Arrived
164063 - 001	Semi-Annual	Editing			02/01/2024 - 12/31/2024	01/10/2025		

#### Select "Edit Status Report"

Status Report Preview Attachments Alert History Map			
Status Report Details	× Withdraw	街 Сору	Edit Status Report

#### Select "Milestone Progress Report"

Component	Complete?	Last Edited
General Information	$\checkmark$	Jul 2, 2024 2:20 PM - Joanne Talleur
Milestone Progress Report		Jul 2, 2024 2:21 PM - Joanne Talleur

- Is this the final Status Report?
  - Select "Yes" or No"
    - Select "Yes" if all project milestones have been completed and you are submitting the Final Status Report
    - Select "No" if project activities are not complete and you are submitting the required semi-annual Status Report
  - Select "Save Form"

Milestone Status Report		Save Form
Is this the final Status Report?*:	Yes No	

Select "Edit All Rows" to edit entire Status Report at once or select Milestone to edit each milestone one at a time

Image: Milestone Progress - Multi-List		🗸 Mari	as Complete 🕴	Add Row 🛛 🗹 Edit All Rows
Milestone	Project Name	Estimated Completion Date	% Milestone Completed	Milestone Progress
1. Determine specifications for needed equipment.			0%	
2. Procurement completed: bidding, vendor selection, and ordering of equipment.			0%	
3. Equipment received, installed, tested and inventoried.			0%	
4. Vendor paid and receipt of proof of payment received.			0%	
5. WebGrants reimbursement completed with all necessary documentation.			0%	
6. Equipment training completed.			0%	
7. Project Final Report submitted and closed out.			0%	

#### Example completed Milestone Progress:

#### Image: Milestone Progress - Multi-List

Project Name	Estimated Completion Date	% Milestone Completed	Milestone Progress
ARPA CIIEG Baseline Organization	09/30/2024	100%	Specifications have been determined.
ARPA CIIEG Baseline Organization	10/31/2024	100%	Procurement on all equipment and supplies has been completed.
ARPA CIIEG Baseline Organization	12/15/2024	100%	Equipment has been received.
ARPA CIIEG Baseline Organization	01/31/2025	20%	Some of the vendors have been paid and proof of payment received.
ARPA CIIEG Baseline Organization	02/28/2025	0%	Anticipate submitting for reimbursement by the end of the year.
ARPA CIIEG Baseline Organization	12/15/2024	100%	Training was completed when equipment was received.
ARPA CIIEG Baseline Organization	03/15/2025	0%	Anticipate closing project early next year.
	ARPA CIIEG Baseline Organization ARPA CIIEG Baseline Organization	Completion DateARPA CIIEG Baseline Organization09/30/2024ARPA CIIEG Baseline Organization10/31/2024ARPA CIIEG Baseline Organization12/15/2024ARPA CIIEG Baseline Organization01/31/2025ARPA CIIEG Baseline Organization02/28/2025ARPA CIIEG Baseline Organization12/15/2024	Completion DateCompletedARPA CIIEG Baseline Organization09/30/2024100%ARPA CIIEG Baseline Organization10/31/2024100%ARPA CIIEG Baseline Organization12/15/2024100%ARPA CIIEG Baseline Organization01/31/202520%ARPA CIIEG Baseline Organization02/28/20250%ARPA CIIEG Baseline Organization12/15/2024100%

Last Edited By: TEST TEST - Sep 4, 2024 3:06 PM

+ Add Row

Edit All Rows

+ Add Row

#### Complete "Milestone Progress" section of Status Report

- Project Name Brief project name (i.e., SFY 2024 Baseline Organization ARPA CIIEG)
  - Estimated Completion Date Estimated completion date for milestone at time of status report
  - Milestone Completed Estimated % of milestone completed at time of status report
- Milestone Progress Enter pertinent notes on milestone (i.e., Specifications for mobile radio complete)

\*\*DO NOT remove or add milestones to the Status Report\*\* \*\*DO NOT create your own Status Report\*\*

#### Complete "Narrative Project Progress"

Select "Add Row"

#### Image: Narrative Project Progress - Multi-List

Project Name What do you anticipate accomplishing in the project over the next six months? Do you have any project accomplishments to be highlighted? Are there any negative issues that need to be highlighted?

- Add Project Name
- What do you anticipate accomplishing in the project over the next six months? Do you have any project accomplishments to be highlighted? Are there any negative issues that need to be highlighted?

Mark as Complete

Add Row

Select "Save Row"



Select "Mark as Complete"

E Milestone Status Report

Is this the final Status Report?\*: Yes

#### Select "Submit Status Report" to submit Status Report to the DPS/OHS

Status Report Preview Attachments Alert History Map		
Status Report Details		🗸 Submit Status Report 🛛 🗙 Withdraw 🖓 Copy 🔍 Preview Status Report
Status Report is in compliance and is ready for Submission!		
Component	Complete?	Last Edited
General Information	~	Jul 2, 2024 2:20 PM - Joanne Talleur
Vilestone Progress Report	~	Sep 4, 2024 3:07 PM - TEST TEST

✓ Mark as Complete

Edit Form

- Correspondence Component of the grant should be used for contacting the DPS/OHS with approval requests/questions/pertinent information regarding your grant
- Select "Correspondence" component in WebGrants

	i≣ Grant Components
1	The grant forms appear below.
١	Your grant award details are saved here, as well as many forms which may be used to manage your grant
Co	omponent
Ge	eneral Information
Сс	ontact Information - FREG / CIIEG
В	Idget
CI	aims
Co	prrespondence
Su	Ibaward Adjustments
St	atus Reports
At	tachments
Pr	oject Package - CIIEG
Su	ibaward Documents - Final
Na	amed Attachments - CIIEG
CI	oseout
Fu	Inding Opportunity
Ap	plication

#### Select "Add Grantee Correspondence" under Inter-System Grantee Correspondence



X Chelsey Call

× Adriana Budean

¥ Joanne Talleur

\* Maria Robinett

To\*:

루 Inter-System Gra	ntee Corre	spondence				🕂 Add	Grantee Corres	pondence
						Search:		
Flag Sent/Received From	То	Subject	Message	Attachment	Attachment	Attachment	Attachment	Attachment
				1	2	3	4	5

- Correspondence Component works similar to email
  - To: Select who you would like to send the message to
    - You may select multiple people by using the Ctrl function on your keyboard
  - CC:Additional people can be added to the message
    - Use a ";" between each email address added

CC:	Additional.people@dps.mo.gov

#### Enter a "Subject" for the message

Subject\*: SFY 2024 ARPA CIIEG

Enter all necessary information in the "Message" section

essage:	📀 Source   🗄 🗟 🖨   🗅 🔓 😰 🗷   🤉 🖆 💭 🍃 🖆
	B I U + X <sub>2</sub> X <sup>2</sup>   ✓ ■ Ξ Ξ □ 11 = Ξ □ 11 = ∞ ∞ ∞ № ■ Ξ Ξ Ω □ ∞ ∞ ■
	Styles • Normal • Font • Size • 📰 • 🖽 •
	Enter all necessary information here
	body p Paragraphs: 1, Words: 5, Characters (with HTML): 44

- Attach any necessary documents in the Attachments section
  - Select "Select File" to locate document on your computer

Attachment 1:	Select file
Attachment 2:	Select file
Attachment 3:	Select file
Attachment 4:	Select file
Attachment 5:	Select file

1 Send Correspondence

Select "Send Correspondence" to send the message to the DPS/OHS

#### F Inter-System Grantee Correspondence

Flag:

- When receiving emails from WebGrants, DO NOT reply from your email
- The reply will go to a generic inbox and will cause a delay in response
- To reply to a message, select the "Subject" section inside WebGrants for the message you

, P	Inter-System	Grantee Corr	respondence						Add Grantee Co	orrespondence
								Sea	arch:	
Flag	Sent/Received	From	То	Subject	Message	Attachment 1	Attachment 2	Attachment 3	Attachment 4	Attachment 5
	07/03/2024	Joanne Talleur	Joanne Talleur	SFY 2024 ARPA CIIEG	Enter all necessary information here	Test adobe.pdf				



#### Select "Reply to Message"

Inter-System Grantee Correspondence

- Select who you want the reply to be sent to
- Add "Message" above the start of the original correspondence
- Add attachments, as applicable
- Select "Send Correspondence"

Flag:	×
To*:	× Joanne Talleur
es must be entered in a valid email fo CC:	ormat, i.e. name@domain.org. Use a semicolon (;) to separate multiple CC email addresses.
Subject*:	RE: SFY 2024 ARPA CIIEG
Message:	$\begin{array}{c c c c c c c c c c c c c c c c c c c $
	Add reply to message here.
	From: Joanne Talleur, Date: 07/03/2024 Enter all necessary information here

# **GRANT FILE**

All grant records shall be retained by the subrecipient for:

- At least 5 years from the end of the state fiscal year in which the grant closes or following notification by the awarding
  agency that the grant has been programmatically and fiscally closed or at least 5 years following the closure of the
  subrecipient's audit report covering the entire award period, whichever is later
- Subrecipient should maintain grant file with grant documentation including but not limited to:
  - Copy of FINAL grant application(s)
  - 2. Fully-executed Subaward Agreement
  - 3. Approved Claims
  - 4. Approved Subaward Adjustments
  - 5. Approved Status Reports
  - 6. Final Status Report

- 7. Monitoring Reports
- 8. Relevant Grant Correspondence
- 9. Procurement Documents
- 10. Disposition of Equipment Forms
- II. Inventory

#### Grant files can be electronic – WebGrants CANNOT serve as your grant file

# **GRANT CLOSEOUT**

#### Grant Period of Performance ends 06/30/2026

- Final Claims and Final Status Report are due 45 days after the end of the period of performance (08/14/2026)
- Final Claim Select "Yes" in "General Information" on the question "Is this your Final Report"

#### Final Status Report

- Select "Yes" on Status Report question "Is this the Final Status Report"
- In the "Narrative Project Progress" section indicate that the project is complete and this submission is the Final Status Report
- Include amount of de-obligated funds, if applicable, in the Narrative Project Progress section

# MONITORING

- Information Bulletin I: Policy on Monitoring discusses monitoring
- The DPS/OHS acts as a pass-through entity and is subject to the requirements of pass-through entities guided by 2 CFR 200
- <u>2 CFR 200.332 (d)</u> states, "All pass-through entities must monitor the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, in compliance with Federal statutes, regulations, and the terms and conditions of the subaward; and that subaward performance goals are achieved"
- Types of Monitoring
  - Desk Review that is completed by the DPS/OHS at the DPS/OHS' office
  - On-Site Review that is conducted by the DPS/OHS at the subrecipient's agency





# MONITORING

#### Scheduling

- Agreed upon date between DPS/OHS and subrecipient
- Given at least 30 days notice
- Topics Covered
  - See Monitoring Information Bulletin

#### Corrective Actions

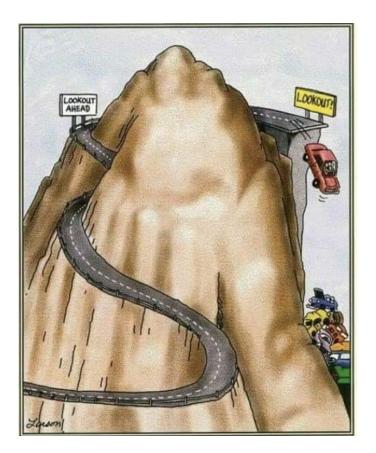
 If observations are made, at least 30 days will be allowed to complete and submit necessary corrective actions



# MONITORING

#### Monitoring is NOT an audit

- DPS/OHS is NOT out to catch you doing something wrong – we are there to HELP correct areas of noncompliance to prevent audit findings
- Chance to provide technical assistance and answer questions



### **IMPORTANT DATES**

Grant Period of Performance Begin – February 1, 2024

Compliance Workshop Acknowledgement Due – September 13, 2024

Subaward Agreements Due – 30 days from receipt

Status Reports Due – January 10 and July 10

Grant Period of Performance End – June 30, 2026

Final Claim and Final Status Report – August 14, 2026

# **QUESTIONS?**



# DPS/OHS CONTACTS

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