



2023 Edward Byrne
Memorial Justice
Assistance Grant (JAG)
2025 State Drug Task Force
(DTF)
Compliance Training
Workshop

Missouri Department of Public Safety Grants

Edward Byrne Memorial Justice Assistance Grant (JAG)/State Drug Task Force (DTF)

Purpose

- ▶ The purpose of the Edward J. Byrne Memorial Justice Assistance Grant
 - ▶ The Missouri Department of Public Safety's strategic priorities encompass several key initiatives including; building relationships with external stakeholders, identifying hazards and threats to public safety, maintaining sufficient capacities to perform statutorily required responsibilities and utilizing Federal and State programs to protect, as well as, provide impactful service to Missouri citizens. The JAG DTF grant opportunity provides resources to combat drug related crimes

Grant Requirements

- ▶ Edward Byrne Memorial Justice Assistance Grant (JAG)
 - ▶ Authorized by 34 U.S.C. §§ 10151-10158
 - ▶ CFDA # 16.738
 - ▶ Awarded to Missouri by the U.S. Department of Justice (DOJ), Office of Justice Program (OJP), Bureau of Justice Systems (BJA)
 - ▶ Provides federal criminal justice funding

Grant Requirements cont.

- ▶ Administrative Guide and Information Bulletins
- ▶ Financial & Administrative Guide for DPS Grants
 - ▶ [DPS Financial and Administrative Guidelines \(mo.gov\)](https://dps.mo.gov/dir/programs/dpsgrants/documents/financial-admin-guidelines.pdf)
 - ▶ <https://dps.mo.gov/dir/programs/dpsgrants/documents/financial-admin-guidelines.pdf>
- ▶ Information Bulletins
 - ▶ CJ/LE-GT-2020-002, Policy on Claim Request Requirements including DPS Reimbursement Checklist
 - ▶ CJ/LE-GT-2020-003, Policy on Budget Modifications, Program Changes, Scope of Work Changes, Status Reports, and Return of Funds
 - ▶ CJ/LE-GT-2023-004, Policy on Monitoring Subrecipient Reporting, Recordkeeping, and Internal Operation and Accounting Control Systems
 - ▶ CJ/LE-GT-2023-005, Policy for Requirement of Subrecipient Pass-Through Entities

Grant Requirements cont.

- ▶ FY 2023 Edward Byrne Memorial Justice Assistance Grant (JAG) Program - State Formula Solicitation: <https://bja.ojp.gov/funding/opportunities/o-bja-2023-171793>
 - ▶ FY 2024 Edward Byrne Memorial Justice Assistance Grant (JAG) Program - State Solicitation: <https://bja.ojp.gov/funding/opportunities/o-bja-2024-172238>
- ▶ Missouri State Statutes: <http://revisor.mo.gov/main>
- ▶ Office of Justice Programs (OJP) Financial Guide: <https://ojp.gov/financialguide/doj/index.htm>

Audit Requirements

- ▶ State and local units of government, institutions of higher education, and other nonprofit institutions, must comply with the organizational audit requirements of 2 CFR Part 200 Subpart F, 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 Federal Audit Clearinghouse within 9 months after the close of each fiscal year during the term of the award <https://www.fac.gov>
 - ▶ Expended funds include all Federal funds, not just JAG DTF funds

State Civil Rights

- ▶ Agencies must comply with State Civil Rights
 - ▶ Section 213.055 RSMo - Unlawful Employment Practices
 - ▶ Section 213.065 RSMo - Discrimination in Public Accommodations
 - ▶ Section 285.530.1 RSMo indicates that an agency will not knowingly employ, hire for employment, or continue to employ an unauthorized alien to perform work within the State of Missouri

Federal Civil Rights

- ▶ Agencies must comply with Federal Civil Rights
 - ▶ Title VI of the Civil Rights Act of 1964 (42 U.S.C. § 2000d)
 - ▶ Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. § 794)
 - ▶ Title II of the Americans with Disabilities Act of 1990 (42 U.S.C. § § 12131-34)
 - ▶ Title IX of the Education Amendments of 1972 (21681, 1683, and 1685-860 U.S.C. § §)
 - ▶ Age Discrimination Act of 1975 (42 U.S.C. § § 6101-07)
 - ▶ U.S. Department of Justice Regulations - Non-Discrimination; Equal Employment Opportunity; Policies and Procedures (28 C.F.R. pt 42)
 - ▶ U.S. Department of Justice Regulations - Equal Treatment for Faith Based Organizations (28 C.F.R. pt 38)
 - ▶ U.S. Department of Justice Regulations - Nondiscrimination on the Basis of Sex in Education Programs or Activities Receiving Federal Financial Assistance (28 C.F.R. pt 54)
 - ▶ Executive Order 13279 (equal protection of the laws for faith-based and community organizations)
 - ▶ Executive Order 13559 (fundamental principles and policymaking criteria for partnerships with faith-based and other neighborhood organizations)

Equal Employment Opportunity Plan (EEO Plan)

- ▶ A workforce report that some organizations must complete as a condition for receiving U.S. Department of Justice funding authorized by the Omnibus Crime Control and Safe Streets Act of 1968
- ▶ EEO Plans are intended to ensure recipients (and subrecipients) of federal funding are providing equal employment opportunities to men and women regardless of sex, race, or national origin
- ▶ The U.S. Department of Justice regulations pertaining to the development of a comprehensive EEO Plan can be found at 28 C.F.R. § 42.301-42.308
- ▶ The U.S. Department of Justice, Office for Civil Rights (OCR) is the federal branch that collects, reviews, and approves EEO Plans
- ▶ Effective in December 2016, the OCR developed an Equal Employment Opportunity (EEO) Reporting Tool to streamline the EEO reporting process. The deployment of the EEO Reporting Tool, however, changed the reporting requirements for recipients of funding from the U.S. Department of Justice

Office for Civil Right's EEOP Website:

<https://ojp.gov/about/ocr/eeop.htm>

Equal Employment Opportunity Plans

The statutory and regulatory information contained on this page does not constitute legal advice and is for general informational purposes only. The OCR makes no guarantee that the statutory authority or regulatory code cited within is the most current version of said law/regulation. For more recent versions of the U.S. Code and the CFR, users should consult the official [revised U.S.C.](#) or the [eCFR](#).

An Equal Employment Opportunity (EEO) plan is a comprehensive document that analyzes a recipient's relevant labor market data, as well as the recipient's employment practices, to identify possible barriers to the participation of women and minorities in all levels of a recipient's workforce. Its purpose is to ensure the opportunity for full and equal participation of men and women in the workplace, regardless of race, color, or national origin.

As a recipient of Department of Justice funding, your organization may be required to submit a Certification Report or the Utilization Report portion of your plan to the Office for Civil Rights. If you are unsure of whether your organization is subject to the Civil Rights requirements of the Safe Streets Act, please refer to the FAQ [How can I tell if a recipient is subject to the Safe Streets Act?](#)

The Equal Employment Opportunity (EEO) Reporting System will allow you to create your organization's account, then prepare and submit an EEO Certification Form and if required, create and submit an EEO Utilization Report. You will also be able to access your organization's saved information in subsequent logins.

[EEO Reporting Tool Login](#)

- Civil Rights Home
- Training Resources
- Filing a Civil Rights Complaint
- Equal Employment Opportunity Plans**
- Equal Employment Opportunity Program (EEOP) FAQs
- Investigative Findings
- Your Language
- Initiatives of Interest
- Statutes & Regulations
- Other Resources and Links
- Data Tools

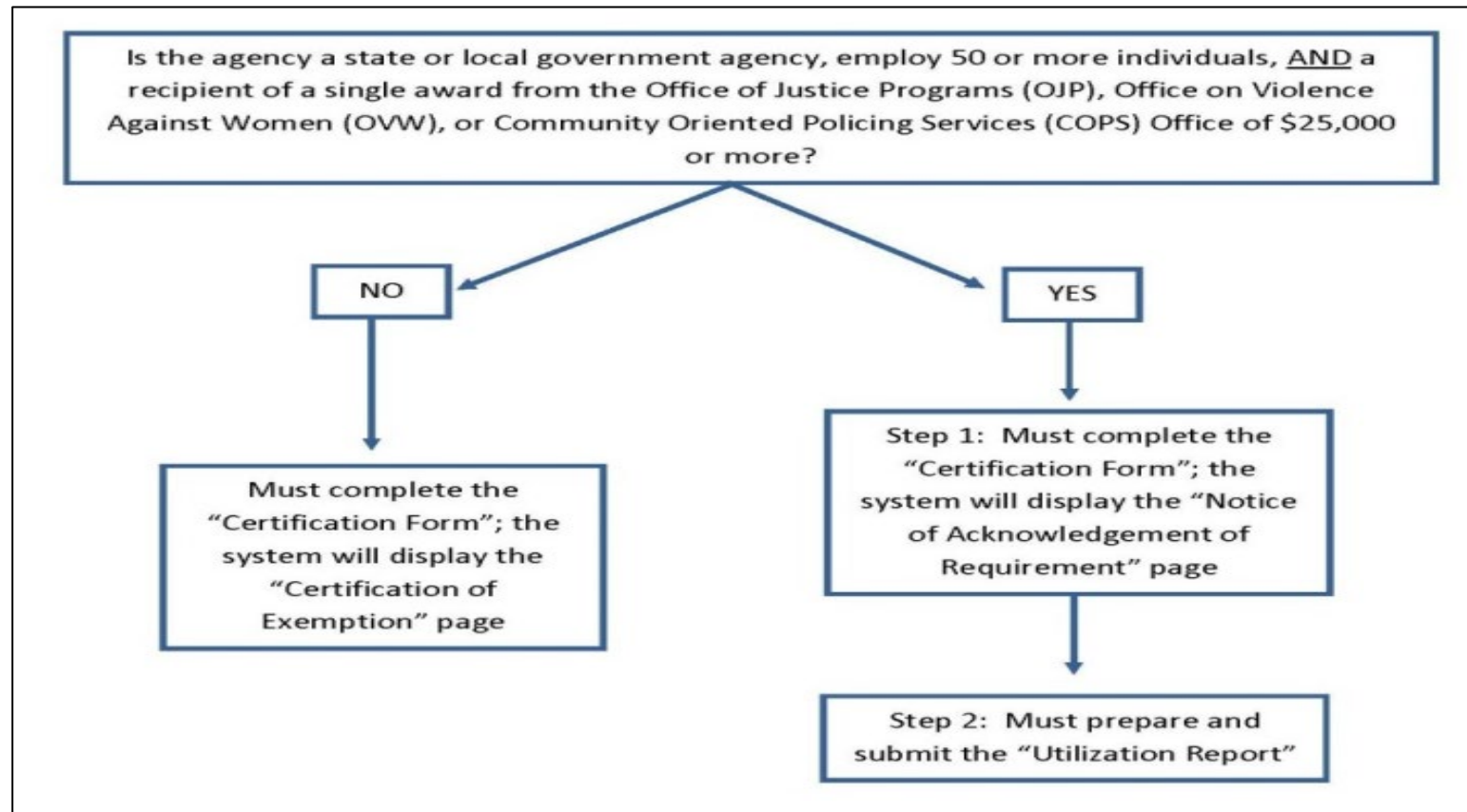
Provides access to the "EEO Reporting Tool Job Aid"

Equal Employment Opportunity (EEO) Plans Certification Form

- ▶ The EEO Certification Form must be prepared for the recipient (or subrecipient) of the federal funding (i.e. county, city, university/college, or state department); the EEO Certification Form is not just for the project agency (i.e. Sheriff's Office, Police Department, State Division)
- ▶ Recipients (and subrecipients) exempt from the EEO reporting requirement must claim such exemption
- ▶ Recipients (and subrecipients) required to prepare an EEO Utilization Report must acknowledge such requirement
 - ▶ Effective with the "EEO Reporting Tool", a "Notice of Acknowledgement of Requirement" form will populate and be submitted to OCR. The Form must be submitted each calendar year for which DOJ funding is received

EEO Determination

- ▶ For calculating the total number of employees, include part-time and fulltime workers but exclude seasonal employees, political appointees, and elected officials



Equal Employment Opportunity Plans Form Example

CERTIFICATION FORM
Compliance with the Equal Employment Opportunity Plan (Equal Employment Opportunity Program) Requirements

Recipient's Name:	Cole County		
Address:	1101 Riverside Dr., Jefferson City, MO 65102		
Recipient Type:	Subrecipient	Law Enforcement Agency:	Yes
DUNS Number:		Vendor Number (only if direct recipient):	
Name of Contact Person:	John Smith	Title of Contact Person:	H.R. Director
Telephone Number:	573-522-1908	E-Mail Address:	jsmith@organization.com
Subrecipients:	No		

Acknowledgement of EEO Data Collection, Maintenance and Submission Requirements

I, **John Smith** (*authorized official*), acknowledge that **Cole County** (*recipient organization*) has an obligation to develop and submit an EEO Utilization Report to the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice (OCR) for **2017** (*fiscal year*). I understand the regulatory obligations under 28 C.F.R. Section 42.301-308 to collect and maintain extensive employment data by race, national origin, and sex, even though our organization may not use all of this data in completing the EEO Utilization Report.

By accepting financial assistance subject to the civil rights provisions of the Safe Streets Act, **Cole County** (*organization*) is on notice that at some future date, during the active award period, the OCR may request any of the employment data noted in the EEO regulations. I understand that in the context of an administrative investigation of an employment discrimination complaint, failure to produce employment data required for a comprehensive EEO report may allow the OCR to draw an adverse inference based on the data's absence.

John Smith, H.R. Director *John Smith* 3/2/2017

Print or Type Name and Title Signature Date

- ▶ Navigate to the OCR EEO webpage
- ▶ Sign into the EEO Reporting Tool
- ▶ The applicable EEO Certification Form will populate based on responses to the type of agency, number of employees, and single largest DOJ award
- ▶ When completed, the EEO Certification Form must be e-signed by the designated official (the “EEO Reporting Tool Job Aid” provides instruction on how to designate this individual)
- ▶ Once e-signed, the EEO Certification Form is then submitted electronically through the EEO Reporting Tool and a confirmation email will be received

Non-Discrimination

- ▶ If the subrecipient has 50 or more employees and receives OJP, OVW, or COPS funding of \$25,000 or more:
 - ▶ The subrecipient must have written policies or procedures in place to notify program participants and employees on how to file complaints alleging discrimination
 - ▶ The subrecipient must designate a person(s) to coordinate complaints alleging discrimination

Non-Discrimination Findings

- ▶ Subrecipients must notify DPS of any findings of discrimination within 30 days of the court judgment
- ▶ Submit the Court Judgment with a cover letter to DPS; the cover letter should identify the DPS-assigned Subaward Number, as indicated on the Subaward Document

Missouri Department of Public Safety

Attn: Director of Public Safety

PO Box 749

Jefferson City, MO 65102

- ▶ DPS must forward to the Office for Civil Rights (OCR)



Grant Set-Up

- ▶ The grant Subaward Agreements were sent to the Primary Contact listed on the application
 - ▶ Subaward documents for both State and Federal subaward amounts were sent
- ▶ The subaward must be signed by the Authorized Official
- ▶ Each page of the Articles of Agreement must be initialed by the Authorized Official
- ▶ The signed subaward needs to be submitted back to the Missouri Department of Public Safety
- ▶ A copy of the signed subaward will be available in WebGrants under Subaward Documents - Final

Pass-Through Requirements

▶ Pass-Through Entities

- ▶ 2 CFR 200.74 defines a pass-through entity as a “non-Federal entity that provides a subaward to a subrecipient to carry out part of a Federal program.”
- ▶ 2 CFR 200.92 defines a subaward as an “award provided by a pass-through entity. It does not include payments to a contractor or payments to an individual that is a beneficiary of a Federal program. A subaward may be provided through any form of legal agreement, including an agreement that the pass-through entity considers a contract.”

Pass-Through Requirements cont.

- ▶ Who is a Pass-Through Entity?
 - ▶ The Missouri Department of Public Safety, DPS Grants, is a pass-through entity as subawards are issued to all of the Drug Task Forces
 - ▶ Your agency is a pass-through entity if it receives a subaward from the DPS Grants and subsequently passes funds, personnel costs, equipment, supplies, etc., to another entity
 - ▶ Example: If the pass-through agency submits a payment to the task force and/or another agency, the agency is a pass-through entity



Pass-Through Requirements cont.

- ▶ 2 CFR 200.332 discusses pass-through entity requirements, which are included:
 - ▶ Risk Assessment
 - ▶ Subaward
 - ▶ Monitoring
- ▶ Information Bulletins
 - ▶ CJ/LE-GT-2023-004, Policy on Monitoring Subrecipient Reporting, Recordkeeping, and Internal Operation and Accounting Control Systems
 - ▶ CJ/LE-GT-2023-005, Policy for Requirement of Subrecipient Pass-Through Entities



Subawards

- ▶ Pass-through entities are required to issue subawards as detailed in 2 CFR 200.332(a)
- ▶ IB CJ/LE-GT-2023-004 - Policy for Requirements of Subrecipient Pass-Through Entities also discusses subaward requirements
- ▶ Certain elements are required to be detailed in the subaward as discussed in 2 CFR 200.332 (a)
- ▶ DPS Grants will provide a subaward template for agencies to use
- ▶ If the pass-through entity chooses to utilize their own subaward template, it must be approved by DPS Grants prior to issuance
- ▶ All Articles of Agreement in the subaward, issued to the pass-through entity, by DPS Grants, must be passed through to their subrecipient via the subaward
 - ▶ It is the responsibility of the pass-through entity to thoroughly read and understand all conditions to maintain compliance

Subawards need to be fully executed prior to issuing any payments to the subrecipients

Subaward Agreement Template

▶ Example:

[Your Agency's Name]		SUBAWARD AGREEMENT	
[Your Agency's Address] (Telephone: XXX-XXX-XXXX Fax: XXX-XXX-XXXX)		DATE XX/XX/XXXX	
		FEDERAL IDENTIFICATION NUMBER 15PBJA-23-GG-02992-MUMU-FXX	CONTROL NUMBER Number
SUBRECIPIENT NAME «Applicant_Agency»		U/EI Number «Unique_Entity_ID»	
ADDRESS «Mailing_Address»			
CITY «City»	STATE MO	ZIP CODE «Zip»	
TOTAL AMOUNT OF THE FEDERAL AWARD «Federal_Awards»		AMOUNT OF FEDERAL FUNDS OBLIGATED BY THIS ACTION «Federal_Award»	
TOTAL AMOUNT OF FEDERAL FUNDS OBLIGATED TO THE SUBRECIPIENT «Federal_Awards»		TOTAL APPROVED COST SHARING OR MATCHING \$0.00	
PROJECT PERIOD FROM 07/01/2024	PROJECT PERIOD TO 06/30/2025	FEDERAL AWARD DATE 09/22/2023	
PROJECT TITLE 2023 Edward Byrne Justice Assistance Grant (JAG) - «Applicant_Agency»		FUNDED BY 2023 Edward Byrne Memorial Justice Assistance Grant JAG	
FEDERAL AWARDCING AGENCY Department of Justice - MO DPS	PASS THROUGH ENTITY (Your Agency)	IS THIS AWARD RAD YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	INDIRECT COST RATE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> AMOUNT
CATALOG OF FEDERAL DOMESTIC ASSISTANCE (CFDA) NUMBER 16.738	METHOD OF PAYMENT (Reimbursement -- Advanced) Reimbursement		
CONTACT INFORMATION			
[YOUR AGENCY'S] CONTACT		SUBRECIPIENT PROJECT DIRECTOR	
NAME (Name)	NAME «PDJob_Title» «PDFirst» «PDLast»		
E-MAIL ADDRESS (Email)	ADDRESS (if different from above) «PD Mailing_Address»		
TELEPHONE (XXX) XXX-XXXX	CITY, STATE AND ZIP CODE «PD_City» MO, «PDZip_Code»		
Agency Officer in Charge (OIC Name)	TELEPHONE «PD_Phone_Update»	E-MAIL ADDRESS «PDEmail»	
SUMMARY DESCRIPTION OF PROJECT The Missouri Department of Public Safety's strategic priorities encompass several key initiatives including building relationships with external stakeholders, identifying hazards and threats to public safety, maintaining sufficient capacities to perform statutorily required responsibilities and utilizing Federal and State programs to protect, as well as, provide impactful service to Missouri citizens. We invite our stakeholders and partners to also adopt these priorities and join us in building more prepared, protected and secure Missouri communities. Public safety is a shared responsibility and funding should support priorities that are the most impactful and demonstrate the greatest return on investment. The Missouri Department of Public Safety seeks to forge partnerships with our law enforcement partners by providing them resources. The JAG DTF grant opportunity provides resources to combat drug related crimes.			
SUBAWARDING AGENCY APPROVAL		SUBRECIPIENT AUTHORIZED OFFICIAL	
TYPED NAME AND TITLE OF JAG SUBAWARDING OFFICIAL		TYPED NAME AND TITLE OF SUBRECIPIENT AUTHORIZED OFFICIAL «AOfirst» «AOLast», «AOJob_Title»	
SIGNATURE OF APPROVING OFFICIAL	DATE	SIGNATURE OF SUBRECIPIENT AUTHORIZED OFFICIAL	DATE
THIS SUBAWARD IS APPROVED SUBJECT TO SUCH CONDITIONS OR LIMITATIONS SET FORTH ON THE ATTACHED SPECIAL CONDITION(S). BY SIGNING THIS SUBAWARD AGREEMENT THE SUBRECIPIENT IS AGREEING TO READ AND COMPLY WITH ALL SPECIAL CONDITIONS.			

Risk Assessments

- ▶ Risk assessment evaluates subrecipient risk of noncompliance to determine appropriate monitoring or additional special conditions
- ▶ 2 CFR 200.332 (b) discusses risk assessment requirements
- ▶ IB CJ/LE-GT-2023-004 - Policy on Monitoring Subrecipient Reporting, Recordkeeping, and Internal Operation and Accounting Control Systems
- ▶ IB CJ/LE-GT-2023-005 - Policy for Requirements of Subrecipient Pass-Through Entities also discuss risk assessment requirements



Risk Assessments cont.

- ▶ Must be completed by pass-through entities for each subrecipient before a subaward is issued
 - ▶ DPS grants will provide the pass-through entity with the Risk Assessment
- ▶ Evaluation of risk may include factors such as:
 - ▶ Prior experience
 - ▶ Previous audit conclusions
 - ▶ New personnel or new/changed time/accounting systems
 - ▶ Federal monitoring conclusions
 - ▶ Other

Risk Assessment Results

- ▶ The pass-through entity may choose to impose special conditions on the subrecipient's subaward based on the results of the risk assessment
- ▶ 2 CFR 200.208 discusses specific conditions the pass-through entity may impose such as:
 - ▶ Withholding authority to proceed to the next phase of a project until receipt of evidence of acceptable performance within a given period of performance
 - ▶ Requiring additional, more detailed financial reports
 - ▶ Requiring additional project monitoring
 - ▶ Requiring the non-Federal entity to obtain technical or management assistance
 - ▶ Establishing additional prior approvals
- ▶ Any special conditions imposed on the subrecipient should be included in the subaward Articles of Agreement

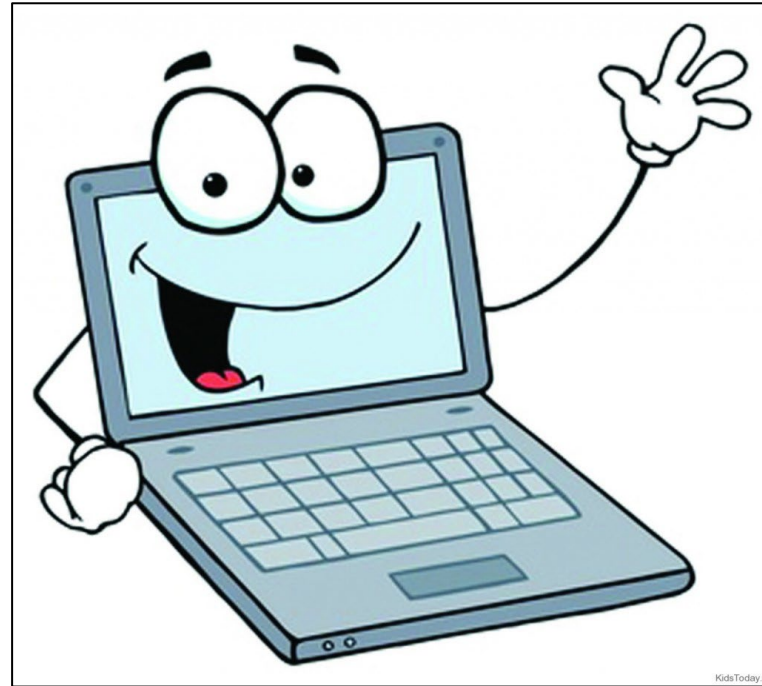
Spending Grant Dollars

- ▶ Funds must be obligated within the project period and expended with 60 days following the project period end date
- ▶ Project Period: July 1, 2024 - June 30, 2025
- ▶ Final claim due August 15, 2025

Grant Reporting

- ▶ Claims must be submitted at least every 3 months
 - ▶ Claims may be submitted as needed
 - ▶ Only one claim may be submitted at a time (i.e. the previous claims must be in “Paid” status before the next claim is submitted)
- ▶ Status Reports must be submitted every Quarter
- ▶ PMT Reports must be submitted every Quarter once Federal funds are being expended

WebGrants





Awards

- ▶ The Subrecipient Agency will again have 2 subawards: 1 Federal and 1 State
- ▶ State funds will be required to be reimbursed before Federal funds
 - ▶ Once the State funds have been expended the Federal award status will be changed to underway

<input type="checkbox"/>	15PBJA-23-GG-02992-MUMU-TEST-F1	Awarded	2024	07/01/2024	06/30/2025	2023 JAG - Whoville Island Narcotics (WIN) Task Force	BaseLine Organization	TEST TEST	Michelle Branson	Edward Byrne Memorial Justice Assistance Grant	27696-Test - 2023 Federal JAG 2025 State DTF	\$217,722.45
<input type="checkbox"/>	2025-SDTF-TEST-S1	Awarded	2024	07/01/2024	06/30/2025	2025 SDTF - Whoville Island Narcotics (WIN) Task Force	BaseLine Organization	TEST TEST	Michelle Branson	Edward Byrne Memorial Justice Assistance Grant	27696-Test - 2023 Federal JAG 2025 State DTF	\$298,722.45

Grant Components

- ▶ Select “Budget”

 Grant Components
The grant forms appear below. Your grant award details are saved
Component
General Information
Contact Information
Budget 
Claims
Correspondence
Subaward Adjustments
Subaward Adjustment Notices
Status Reports
Attachments
Subaward Documents - Final
Closeout
Site Visits
Funding Opportunity
Application



Budget Changes

- ▶ Budgets will be adjusted to 1 line per category, (i.e. all Personnel on 1 line, all Personnel Benefits on 1 line, etc.), except for Equipment
 - ▶ Each piece of Equipment requested will have its own individual budget line
- ▶ Verify your budget for each grant as some items may only be on one of the subawards



Budget

▶ Example

 Budget - Multi-List				
To include lines in your budget, click "Add". If the project includes more than one budget line, repeat this step for each budget line.				
Line Item Code	Budget Line Category	Line Name	Description	Amount of Grant Funds Requested
1001	1. Personnel	Salary	4 TFOs	\$150,000.00
1001	1. Personnel	M&A Salary	M&A - Salary	\$22,236.80
		Subtotal		\$172,236.80
2001	2. Personnel Benefits	Benefits	F/M; Medical Insurance, Retirement; WC	\$20,502.45
2002	2. Personnel Benefits	M&A - Benefits	M&A - Benefits: F/M; Retirement; WC	\$5,459.20
		Subtotal		\$25,961.65
3001	3. Overtime Personnel	Overtime	4 TFOs	\$5,000.00
		Subtotal		\$5,000.00
4001	4. Overtime Benefits	Overtime Benefits	F/M; Retirement; WC	\$524.00
		Subtotal		\$524.00
9001	5. Travel/Training	Fuel	5 Vehicles Fuel	\$6,000.00
9002	5. Travel/Training	Vehicle Maintenance	5 Vehicles Maintenance	\$6,000.00
		Subtotal		\$12,000.00
10001	6. Equipment	Mobile Radio (2)	Motorola APX 8500	\$11,000.00
10002	6. Equipment	Portable Radio (2)	Motorola APX 8000	\$10,000.00
		Subtotal		\$21,000.00
11001	7. Supplies/Operations	Office Supplies	Office Supplies	\$1,000.00
11002	7. Supplies/Operations	Field Supplies	Field Supplies	\$1,000.00
		Subtotal		\$2,000.00
12001	8. Contractual	Vehicle Leases	5 TFO Vehicle Leases	\$60,000.00
		Subtotal		\$60,000.00
				\$298,722.45

Claims Entry

- ▶ Sign into the WebGrants System and select the applicable grant
- ▶ From Grant Components, select “Claims”

 Grant Components
The grant forms appear below. Your grant award details are saved
Component
General Information
Contact Information
Budget
Claims 
Correspondence
Subaward Adjustments
Subaward Adjustment Notices
Status Reports
Attachments
Subaward Documents - Final
Closeout
Site Visits
Funding Opportunity
Application

Claims Entry cont.

- ▶ Select “Add Claim”
- ▶ If this is not your first claim, and a previous claim is in “Paid” status, then the ability to select “Copy Claim” is available (when using “Copy Claim” errors are often made because updates are not all completed. It may be easier to use the “Add Claim” option for each claim.)

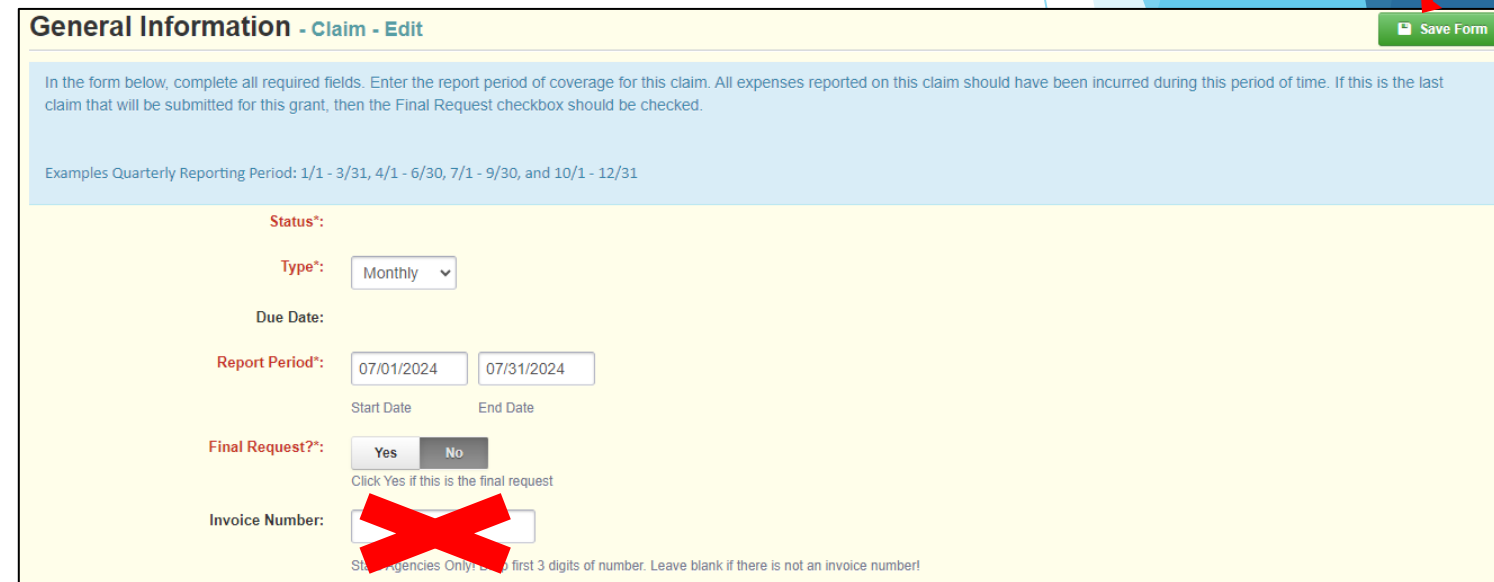


The screenshot shows a web interface for managing claims. At the top left, there is a header 'Claims' with a refresh icon. On the top right, there is a green button labeled '+ Add Claim'. Below the header, a light blue bar contains the text 'All claims associated with this grant appear below.' Underneath this is a table with the following columns: ID (with an up arrow), Type (with a down arrow), Status (with a down arrow), Start Date (with a down arrow), End Date (with a down arrow), Last Submitted Date (with a down arrow), Paid Date (with a down arrow), and Claim Amount (with a down arrow). A red arrow points from the right side of the slide towards the '+ Add Claim' button.

ID ▲	Type ▼	Status ▼	Start Date ▼	End Date ▼	Last Submitted Date ▼	Paid Date ▼	Claim Amount ▼
------	--------	----------	--------------	------------	-----------------------	-------------	----------------

Claims Entry cont.

- ▶ Complete the Claim General Information
- ▶ Type - Monthly
- ▶ Reporting Period - Month(s) covered by the claim
- ▶ Final Request? - Is this your Final Report - Select No on all claims until the final claim
- ▶ Invoice Number - **LEAVE BLANK**
- ▶ Select “Save Form”



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

Status*:

Type*: Monthly

Due Date:

Report Period*: 07/01/2024 07/31/2024
Start Date End Date

Final Request?* Yes No
Click Yes if this is the final request

Invoice Number:

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

Claim Components

- ▶ Select “Detail of Expenditure” from the components section

Claim Preview Attachments Alert History Map	
📌 Claim Details	
Claim cannot be Submitted Currently <ul style="list-style-type: none">• Claim components are not complete	
Component	Complete?
General Information	✓
Detail of Expenditure	
Program Income	
Equipment Inventory	
Other Attachments	

Detail of Expenditure

- ▶ For each expenditure, select “Add Row”, to add a line to the Detail of Expenditures form

Claim List Genera Detail Progra Equipm Other

Detail of Expenditure - Current Version

Budget - Multi-List [+ Add Row](#)

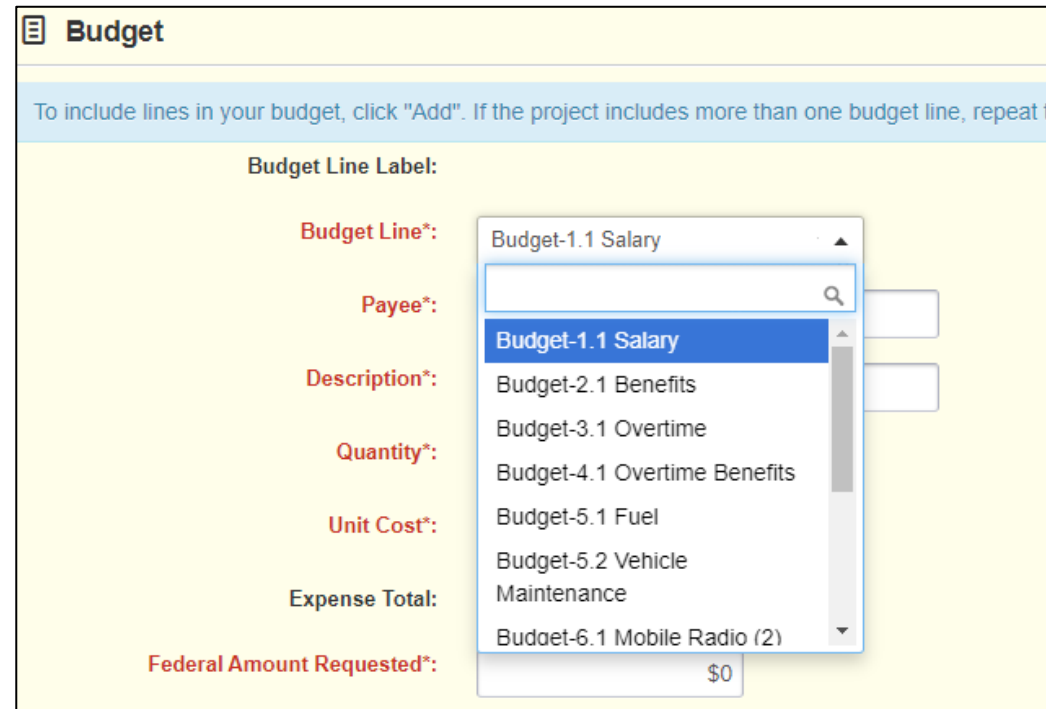
To include lines in your budget, click "Add". If the project includes more than one budget line, repeat this step for each budget line.

Budget Line Label	Payee	Description	Quantity	Unit Cost	Expense Total	Federal Amount Requested	Invoice #	Invoice Date	Check/EFT Number	Check/EFT Date
No Data for Table										

[+ Add Row](#)

Detail of Expenditure cont.

- ▶ Complete each line of the Expenditures form
- ▶ Budget Line - this is a drop-down section, which will show each line of the approved budget



Budget

To include lines in your budget, click "Add". If the project includes more than one budget line, repeat the

Budget Line Label:

Budget Line*: Budget-1.1 Salary

Payee*:

Description*: Budget-1.1 Salary

Quantity*:

Unit Cost*:

Expense Total:

Federal Amount Requested*: \$0

The dropdown menu lists the following budget lines:

- Budget-1.1 Salary
- Budget-2.1 Benefits
- Budget-3.1 Overtime
- Budget-4.1 Overtime Benefits
- Budget-5.1 Fuel
- Budget-5.2 Vehicle Maintenance
- Budget-6.1 Mobile Radio (2)

Detail of Expenditure cont.

- ▶ Budget Line
 - ▶ Select the corresponding budget line (i.e. Personnel, Benefits, etc.)
- ▶ Payee
 - ▶ Add the name of the Individual, Vendor or Company that is receiving the payment
- ▶ Description
 - ▶ Payroll and Benefits should include the dates of the pay period for the person listed in Payee (i.e. Payroll (07/01/24 - 07/31/24); or Benefits (07/01/24 - 07/31/24))
 - ▶ Description of item purchased for other categories (i.e. Fuel; Equipment; Office Supplies; Vehicle Lease)
- ▶ Quantity
 - ▶ Quantity for a pay period should be 1
 - ▶ When purchasing equipment it should list the actual number, also if leasing multiple vehicles, it should have the correct number of vehicles listed in the expenditure line
- ▶ Unit Cost
 - ▶ Unit cost of item (this needs to be the amount if multiplied by the Quantity will equal the Federal Amount Requested)
 - ▶ The Federal Amount Requested for each line will then auto-transfer to the Reimbursement chart

Detail of Expenditure cont.

- ▶ Federal Amount Requested
 - ▶ This is the total amount of funds being requested
 - ▶ NOTE: The number in Unit Cost multiplied by the Quantity that is added needs to be equal to the Federal Amount requested
- ▶ Invoice #
 - ▶ For payroll and benefits you may use the number of the claim being submitted, or the month(s), (i.e. 1 or July), can also be listed as N/A
 - ▶ For other items, the invoice number from the vendor should be entered
- ▶ Invoice Date
 - ▶ For payroll, the date that the employee is paid should be used
 - ▶ For purchases it should be the date listed on the invoice
- ▶ Check/EFT Number
 - ▶ Number of the check used for payment(s) to the employee or the vendor
- ▶ Check/EFT Date
 - ▶ Date of the check used for the payment(s)

Detail of Expenditure cont.

- ▶ Example Payroll
- ▶ Select “Save Row”

Budget Save Row

To include lines in your budget, click "Add". If the project includes more than one budget line, repeat this step for each budget line.

Budget Line Label:

Budget Line*: Budget-1.1 Salary

Payee*: TFO #1

Description*: 07/01/24-07/31/24

Quantity*: 1

Unit Cost*: 2500.00

Expense Total:

Federal Amount Requested*: 2500.00

Invoice #*: July 2024

Invoice Date*: 08/05/24

Check/EFT Number*: 3241

Check/EFT Date*: 08/05/24

Save Row

Detail of Expenditure cont.

- ▶ Benefit Example
- ▶ Select “Save Row”

Budget Save Row

To include lines in your budget, click "Add". If the project includes more than one budget line, repeat this step for each budget line.

Budget Line Label:

Budget Line*: Budget-2.1 Benefits

Payee*: TFO #1

Description*: Benefits 07/01/24-07/31/24

Quantity*: 1

Unit Cost*: 150.0

Expense Total:

Federal Amount Requested*: 150.00

Invoice #*: N/A

Invoice Date*: N/A

Check/EFT Number*: N/A

Check/EFT Date*: N/A

Save Row

Detail of Expenditure cont.

- ▶ Travel/Training Example
- ▶ Select “Save Row”

Budget Save Row

To include lines in your budget, click "Add". If the project includes more than one budget line, repeat this step for each budget line.

Budget Line Label:

Budget Line*: Budget-5.1 Fuel

Payee*: WEX

Description*: Fuel (3 TFO Vehicles) 07/01/24-07/31/24

Quantity*: 1

Unit Cost*: 660.00

Expense Total:

Federal Amount Requested*: 600.00

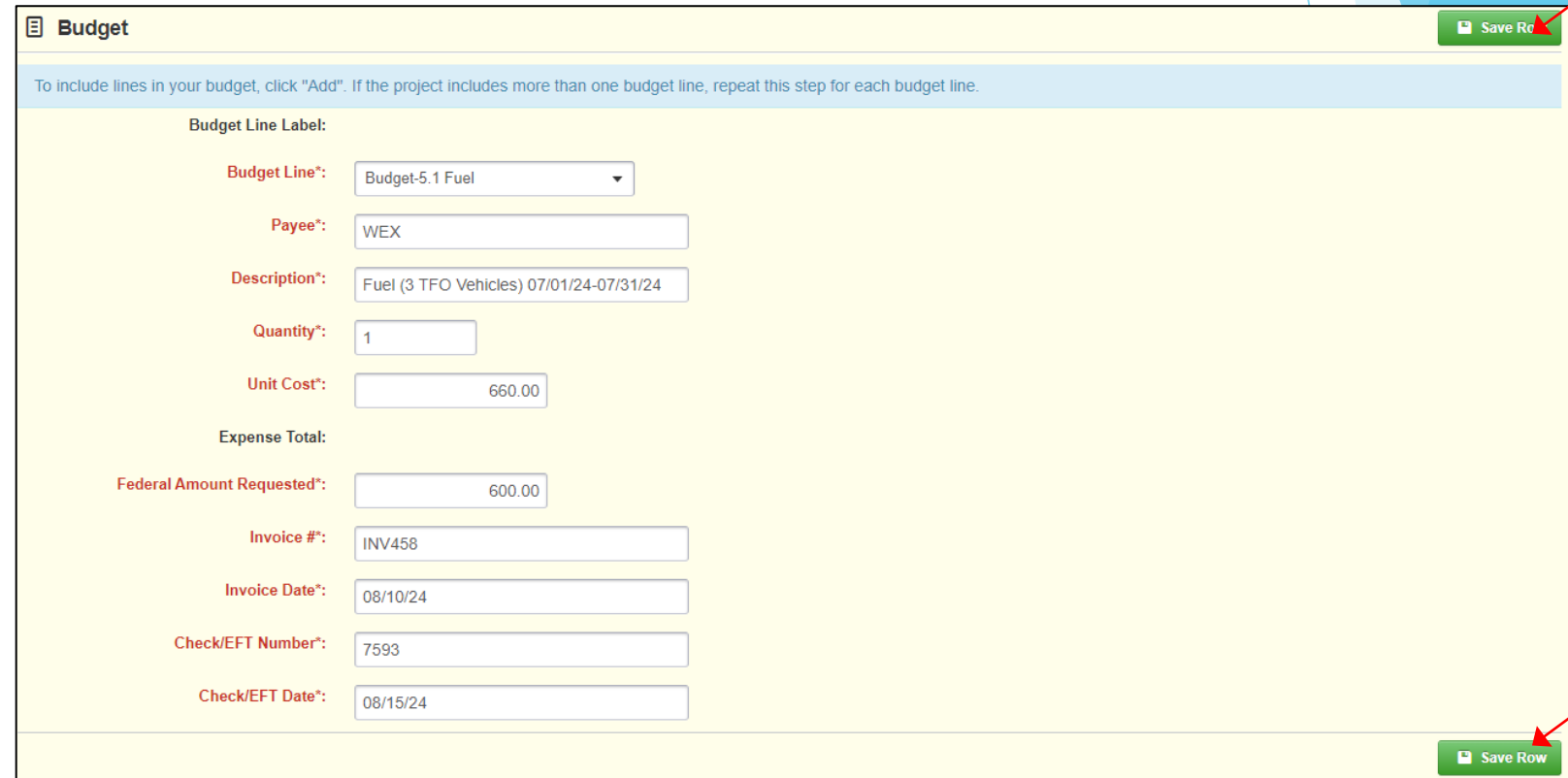
Invoice #*: INV458

Invoice Date*: 08/10/24

Check/EFT Number*: 7593

Check/EFT Date*: 08/15/24

Save Row



Detail of Expenditure cont.

- ▶ Equipment Example
- ▶ Select “Save Row”

Budget Save Row

To include lines in your budget, click "Add". If the project includes more than one budget line, repeat this step for each budget line.

Budget Line Label:

Budget Line*: Budget-6.1 Mobile Radio (2) ▼

Payee*: Motorola

Description*: APX8500 Mobile Radio

Quantity*: 1

Unit Cost*: 5500.00

Expense Total:

Federal Amount Requested*: 5500.00

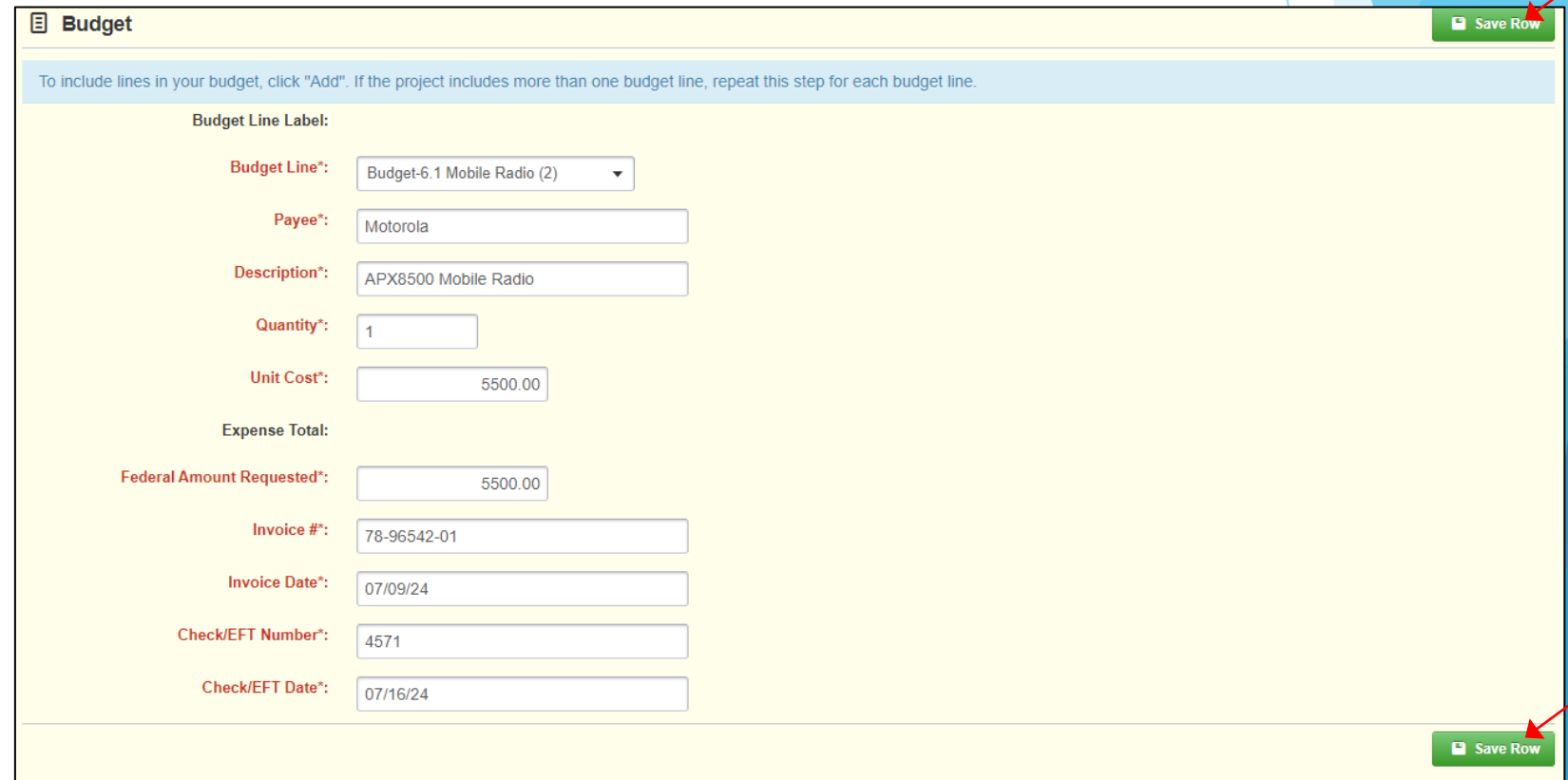
Invoice #*: 78-96542-01

Invoice Date*: 07/09/24

Check/EFT Number*: 4571

Check/EFT Date*: 07/16/24

Save Row



Detail of Expenditure cont.

- ▶ Supplies/Operations Example
- ▶ Select “Save Row”

Budget Save Row

To include lines in your budget, click "Add". If the project includes more than one budget line, repeat this step for each budget line.

Budget Line Label:

Budget Line*: Budget-7.1 Office Supplies

Payee*: Staples

Description*: Office Supplies

Quantity*: 1

Unit Cost*: 156.26

Expense Total:

Federal Amount Requested*: 156.26

Invoice #*: 319846521984

Invoice Date*: 07/05/24

Check/EFT Number*: 3490

Check/EFT Date*: 07/15/24

Save Row

Detail of Expenditure cont.

- ▶ Contractual Example
- ▶ Select “Save Row”

Budget Save Row

To include lines in your budget, click "Add". If the project includes more than one budget line, repeat this step for each budget line.

Budget Line Label:

Budget Line*: Budget-8.1 Vehicle Leases

Payee*: Enterprise Auto Leasing

Description*: TFO Lease Vehicles (5) (07/01/24-07/31/24)

Quantity*: 5

Unit Cost*: 750.00

Expense Total:

Federal Amount Requested*: 3750.00

Invoice #*: PRISE-240501

Invoice Date*: 07/05/24

Check/EFT Number*: 34962

Check/EFT Date*: 07/30/24

Save Row

Detail of Expenditure cont.

► Detail of Expenditure Form, Budget completed example

Budget - Multi-List ✓ Mark as Complete + Add Row										
To include lines in your budget, click "Add". If the project includes more than one budget line, repeat this step for each budget line.										
Budget Line Label	Payee	Description	Quantity	Unit Cost	Expense Total	Federal Amount Requested	Invoice #	Invoice Date	Check/EFT Number	Check/EFT Date
Budget-1.1 Salary	TFO #1	07/01/24-07/31/24	1.00	\$2,500.00	\$2,500.00	\$2,500.00	July 2024	08/05/24	3241	08/05/24
						\$2,500.00				
Budget-2.1 Benefits	TFO #1	Benefits 07/01/24-07/31/24	1.00	\$150.00	\$150.00	\$150.00	N/A	N/A	N/A	N/A
						\$150.00				
Budget-3.1 Overtime	TFO #1	OT 07/01/24-07/31/24	1.00	\$100.00	\$100.00	\$100.00	July 2024	08/05/24	3241	08/05/24
						\$100.00				
Budget-4.1 Overtime Benefits	TFO #1	OT Benefits 07/01/24-07/31/24	1.00	\$25.00	\$25.00	\$25.00	N/A	N/A	N/A	n
						\$25.00				
Budget-5.1 Fuel	WEX	Fuel (3 TFO Vehicles) 07/01/24-07/31/24	1.00	\$660.00	\$660.00	\$600.00	INV458	08/10/24	7593	08/15/24
						\$600.00				
Budget-5.2 Vehicle Maintenance	ABC Fix-It-All	Oil Change (VIN 1254)	1.00	\$65.00	\$65.00	\$65.00	24-4589	07/15/24	756	07/20/24
						\$65.00				
Budget-6.1 Mobile Radio (2)	Motorola	APX8500 Mobile Radio	1.00	\$5,500.00	\$5,500.00	\$5,500.00	78-96542-01	07/09/24	4571	07/16/24
						\$5,500.00				
Budget-6.2 Portable Radio (2)	Motorola	APX8000 Portable Radio	2.00	\$5,000.00	\$10,000.00	\$10,000.00	78-96542-01	07/09/24	4571	07/16/24
						\$10,000.00				
Budget-7.1 Office Supplies	Staples	Office Supplies	1.00	\$156.26	\$156.26	\$156.26	319846521984	07/05/24	3490	07/15/24
						\$156.26				
Budget-7.2 Field Supplies	Field Supplies 101	Field Supplies	1.00	\$175.00	\$175.00	\$175.00	4586321	07/06/24	9513	07/16/24
						\$175.00				

Detail of Expenditure cont.

► Detail of Expenditure Form, Budget completed example

☰ Reimbursement ✔ Mark as Complete									
Budget Category	Details	Subaward Budget	Expenses This Period	Prior Expenses (Paid)	Total	Available Balance (Unpaid)	Prior Expenses (Submitted Not Paid)	Total Claimed	Remaining Balance (Unclaimed)
Budget									
1.1 Salary	1001 1.1 Salary	\$150,000.00	\$2,500.00	\$0.00	\$2,500.00	\$147,500.00	\$0.00	\$2,500.00	\$147,500.00
1.2 M&A Salary	1001 1.2 M&A Salary	\$22,236.80	\$500.00	\$0.00	\$500.00	\$21,736.80	\$0.00	\$500.00	\$21,736.80
2.1 Benefits	2001 2.1 Benefits	\$20,502.45	\$150.00	\$0.00	\$150.00	\$20,352.45	\$0.00	\$150.00	\$20,352.45
2.2 M&A - Benefits	2002 2.2 M&A - Benefits	\$5,459.20	\$50.00	\$0.00	\$50.00	\$5,409.20	\$0.00	\$50.00	\$5,409.20
3.1 Overtime	3001 3.1 Overtime	\$5,000.00	\$100.00	\$0.00	\$100.00	\$4,900.00	\$0.00	\$100.00	\$4,900.00
4.1 Overtime Benefits	4001 4.1 Overtime Benefits	\$524.00	\$25.00	\$0.00	\$25.00	\$499.00	\$0.00	\$25.00	\$499.00
5.1 Fuel	9001 5.1 Fuel	\$6,000.00	\$660.00	\$0.00	\$660.00	\$5,340.00	\$0.00	\$660.00	\$5,340.00
5.2 Vehicle Maintenance	9002 5.2 Vehicle Maintenance	\$6,000.00	\$65.00	\$0.00	\$65.00	\$5,935.00	\$0.00	\$65.00	\$5,935.00
6.1 Mobile Radio (2)	10001 6.1 Mobile Radio (2)	\$11,000.00	\$5,500.00	\$0.00	\$5,500.00	\$5,500.00	\$0.00	\$5,500.00	\$5,500.00
6.2 Portable Radio (2)	10002 6.2 Portable Radio (2)	\$10,000.00	\$10,000.00	\$0.00	\$10,000.00	\$0.00	\$0.00	\$10,000.00	\$0.00
7.1 Office Supplies	11001 7.1 Office Supplies	\$1,000.00	\$156.26	\$0.00	\$156.26	\$843.74	\$0.00	\$156.26	\$843.74
7.2 Field Supplies	11002 7.2 Field Supplies	\$1,000.00	\$175.00	\$0.00	\$175.00	\$825.00	\$0.00	\$175.00	\$825.00
8.1 Vehicle Leases	12001 8.1 Vehicle Leases	\$60,000.00	\$3,750.00	\$0.00	\$3,750.00	\$56,250.00	\$0.00	\$3,750.00	\$56,250.00
		\$298,722.45	\$23,631.26	\$0.00	\$23,631.26	\$275,091.19	\$0.00	\$23,631.26	\$275,091.19
		\$298,722.45	\$23,631.26	\$0.00	\$23,631.26	\$275,091.19	\$0.00	\$23,631.26	\$275,091.19

Detail of Expenditure cont.

- ▶ When all Expenditure lines have been entered, verify that the Expenditure amounts are in the Reimbursement table correctly
 - ▶ If the amounts do not match, contact your Grant Specialist for assistance
- ▶ Select, “Mark as Complete”

Budget Category	Details	Subaward Budget	Expenses This Period	Prior Expenses (Paid)	Total	Available Balance (Unpaid)	Prior Expenses (Submitted Not Paid)	Total Claimed	Remaining Balance (Unclaimed)
Budget									
1 Salary	1001 1.1 Salary	\$150,000.00	\$2,500.00	\$0.00	\$2,500.00	\$147,500.00	\$0.00	\$2,500.00	\$147,500.00
2 M&A Salary	1001 1.2 M&A Salary	\$22,236.80	\$500.00	\$0.00	\$500.00	\$21,736.80	\$0.00	\$500.00	\$21,736.80
1 Benefits	2001 2.1 Benefits	\$20,502.45	\$150.00	\$0.00	\$150.00	\$20,352.45	\$0.00	\$150.00	\$20,352.45
2 M&A - Benefits	2002 2.2 M&A - Benefits	\$5,459.20	\$50.00	\$0.00	\$50.00	\$5,409.20	\$0.00	\$50.00	\$5,409.20
1 Overtime	3001 3.1 Overtime	\$5,000.00	\$100.00	\$0.00	\$100.00	\$4,900.00	\$0.00	\$100.00	\$4,900.00
1 Overtime Benefits	4001 4.1 Overtime Benefits	\$524.00	\$25.00	\$0.00	\$25.00	\$499.00	\$0.00	\$25.00	\$499.00
1 Fuel	9001 5.1 Fuel	\$6,000.00	\$660.00	\$0.00	\$660.00	\$5,340.00	\$0.00	\$660.00	\$5,340.00
2 Vehicle Maintenance	9002 5.2 Vehicle Maintenance	\$6,000.00	\$65.00	\$0.00	\$65.00	\$5,935.00	\$0.00	\$65.00	\$5,935.00
1 Mobile Radio (2)	10001 6.1 Mobile Radio (2)	\$11,000.00	\$5,500.00	\$0.00	\$5,500.00	\$5,500.00	\$0.00	\$5,500.00	\$5,500.00
2 Portable Radio (2)	10002 6.2 Portable Radio (2)	\$10,000.00	\$10,000.00	\$0.00	\$10,000.00	\$0.00	\$0.00	\$10,000.00	\$0.00
1 Office Supplies	11001 7.1 Office Supplies	\$1,000.00	\$156.26	\$0.00	\$156.26	\$843.74	\$0.00	\$156.26	\$843.74
2 Field Supplies	11002 7.2 Field Supplies	\$1,000.00	\$175.00	\$0.00	\$175.00	\$825.00	\$0.00	\$175.00	\$825.00
1 Vehicle Leases	12001 8.1 Vehicle Leases	\$60,000.00	\$3,750.00	\$0.00	\$3,750.00	\$56,250.00	\$0.00	\$3,750.00	\$56,250.00
		\$298,722.45	\$23,631.26	\$0.00	\$23,631.26	\$275,091.19	\$0.00	\$23,631.26	\$275,091.19
		\$298,722.45	\$23,631.26	\$0.00	\$23,631.26	\$275,091.19	\$0.00	\$23,631.26	\$275,091.19

Advanced Payment

- ▶ Information Bulletin #1: Policy on Advanced Payment and Cash Advances
- ▶ If your agency does not have funding to make an upfront payment, Advanced Payment may be requested
 - ▶ Required documentation
 - ▶ Official payroll documentation, timesheets or personnel certification form
 - ▶ Invoice
 - ▶ Signed Proof of Delivery
 - ▶ Minimum amount per vendor per invoice request is \$2500
- ▶ Advanced Payment recipients are required to submit Proof of Payment due to DPS Grants within 30 days of the claim being paid in WebGrants through the “Correspondence” component
- ▶ Contact your Grant Specialist prior to, if you are needing Advanced Payment(s)

Advanced Payment cont.

▶ Example on how to report Advanced Payment

Line Number	Payee	Description	Quantity	Unit Cost	Expense Total	Federal Amount Requested	Invoice #	Invoice Date	Check/EFT Number	Check/EFT Date
10001	SHI Missouri State Vendor	Desk Top Workstation	2.0	\$2,063.50	\$4,127.00	\$4,127.00	1234	8/12/22	Advance Payment	Advance Payment
1001	Whoville County	07/01-07/15/22 (AG, BB, MW)	1.0	\$3,000.00	\$3,000.00	\$3,000.00	N/A	N/A	Advanced Payment	Advanced Payment

- ▶ Advanced Payment must be stated in the Check Number & Check Date fields of the Expenditure
- ▶ Payee must be reported as **Agency** or **Vendor** that is receiving the payment
- ▶ Description if requesting for payroll must report the name or initial of the task force officer & to include payroll periods

Claim Components

- ▶ Select “Program Income”

Claim Preview Attachments Alert History Map	
🔒 Claim Details	
Claim cannot be Submitted Currently <ul style="list-style-type: none">• Claim components are not complete	
Component	Complete?
General Information	✓
Detail of Expenditure	✓
Program Income	
Equipment Inventory	
Other Attachments	

Program Income

- ▶ Program Income will be reported the same as in previous years
 - ▶ If no Program Income is to collected/expended, select “Save Form” and then “Mark as Complete”
- ▶ If you need to report Program Income
 - ▶ Enter in the amounts for
 - ▶ Balance Prior to Reporting Period
 - ▶ Earned this Reporting Period
 - ▶ Expended this Reporting Period

☰ Program Income	
Balance Prior to Reporting Period:	<input type="text" value="\$0"/>
Earned this Reporting Period:	<input type="text" value="\$0"/>
Expended this Reporting Period:	<input type="text" value="\$0"/>

Program Income cont.

- ▶ Program Income Attachment
 - ▶ Select “Select File”
 - ▶ Browse your computer for the file to attach
- ▶ Select “Save Form”

Program Income Attachment Save Form

If reporting the expenditure of program income, must attach copies of receipts to support the expenses.

If this document is not saved on a computer or disk but is rather a sheet of printed paper, it will need to be scanned and saved to a computer file location.

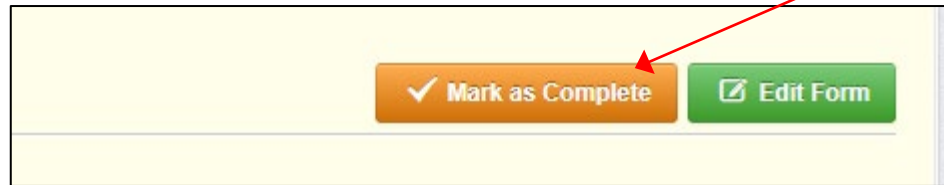
If the document is multiple pages and you wish to attach just one file, check your scanner settings to ensure the pages can be saved as one file or use the free, online tool called PDF Merge if it is necessary to combine multiple 1-page scans into 1 saved document.

Do not attach a password-protected file as the Print to PDF feature in WebGrants will not be able to open it.

Program Income Attachment: Select file Save Form

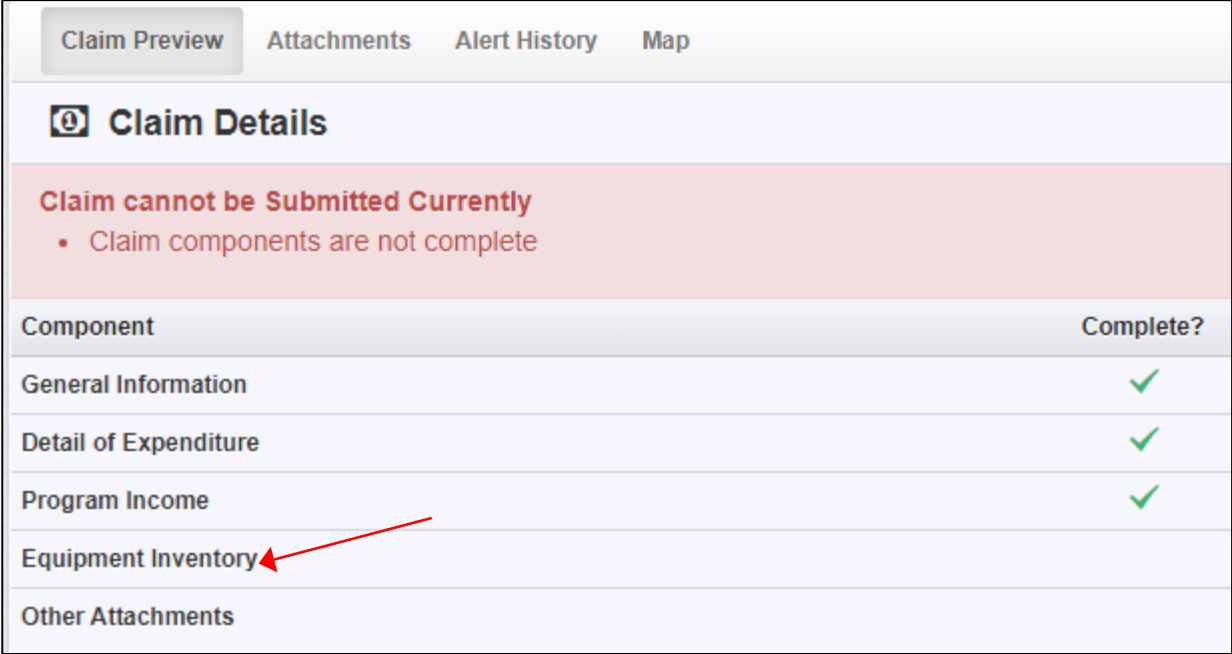
Program Income cont.

- ▶ Select “Mark as Complete”



Claim Form

- ▶ Select “Equipment Inventory”

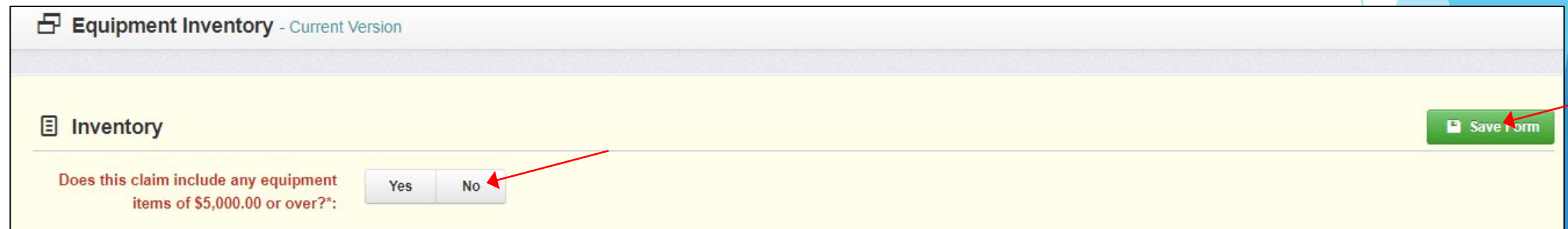


The screenshot shows a web interface for a claim form. At the top, there are four tabs: "Claim Preview" (selected), "Attachments", "Alert History", and "Map". Below the tabs is a section titled "Claim Details" with a lock icon. A red banner message states "Claim cannot be Submitted Currently" with a sub-bullet "Claim components are not complete". Below this is a table with two columns: "Component" and "Complete?". The table lists five components: "General Information", "Detail of Expenditure", "Program Income", "Equipment Inventory", and "Other Attachments". The first three components have green checkmarks in the "Complete?" column. The "Equipment Inventory" row is highlighted, and a red arrow points to it from the left.

Component	Complete?
General Information	✓
Detail of Expenditure	✓
Program Income	✓
Equipment Inventory	
Other Attachments	

Equipment Inventory

- ▶ If no Equipment is requested for reimbursement
 - ▶ Select “No”, to the question, then select “Save From”, and select “Mark as Complete”



Equipment Inventory - Current Version

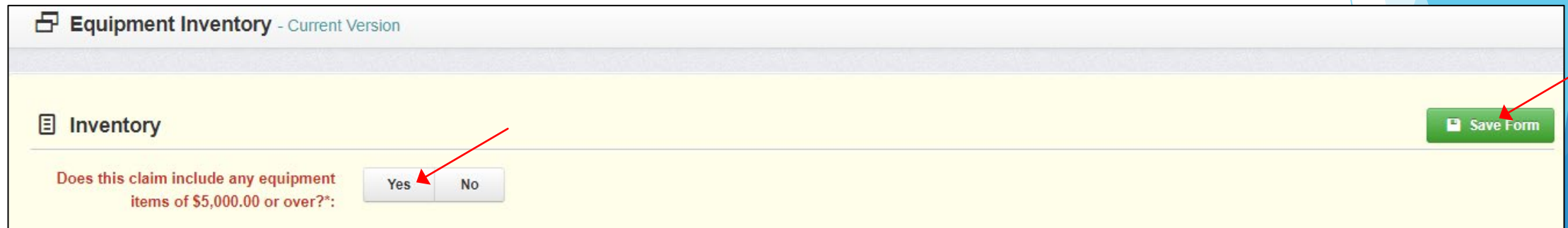
Inventory Save Form

Does this claim include any equipment items of \$5,000.00 or over?*: Yes No



Equipment Inventory cont.

- ▶ If there is Equipment requested for reimbursement
 - ▶ Select “Yes” to the question, then select “Save Form”



Equipment Inventory - Current Version

Inventory

Does this claim include any equipment items of \$5,000.00 or over?*

Yes No

Save Form

Detailed description: This is a screenshot of a web form titled 'Equipment Inventory - Current Version'. The form has a yellow background. At the top left, there is a header 'Equipment Inventory - Current Version'. Below that, there is a section titled 'Inventory'. In the center of the form, there is a question: 'Does this claim include any equipment items of \$5,000.00 or over?*' with two radio button options: 'Yes' and 'No'. A red arrow points to the 'Yes' button. On the right side of the form, there is a green button labeled 'Save Form'. Another red arrow points to this button.

- ▶ Select “Add Row” in the Equipment Detail section, to add each piece of equipment



Equipment Detail - Multi-List

Mark as Complete Add Row

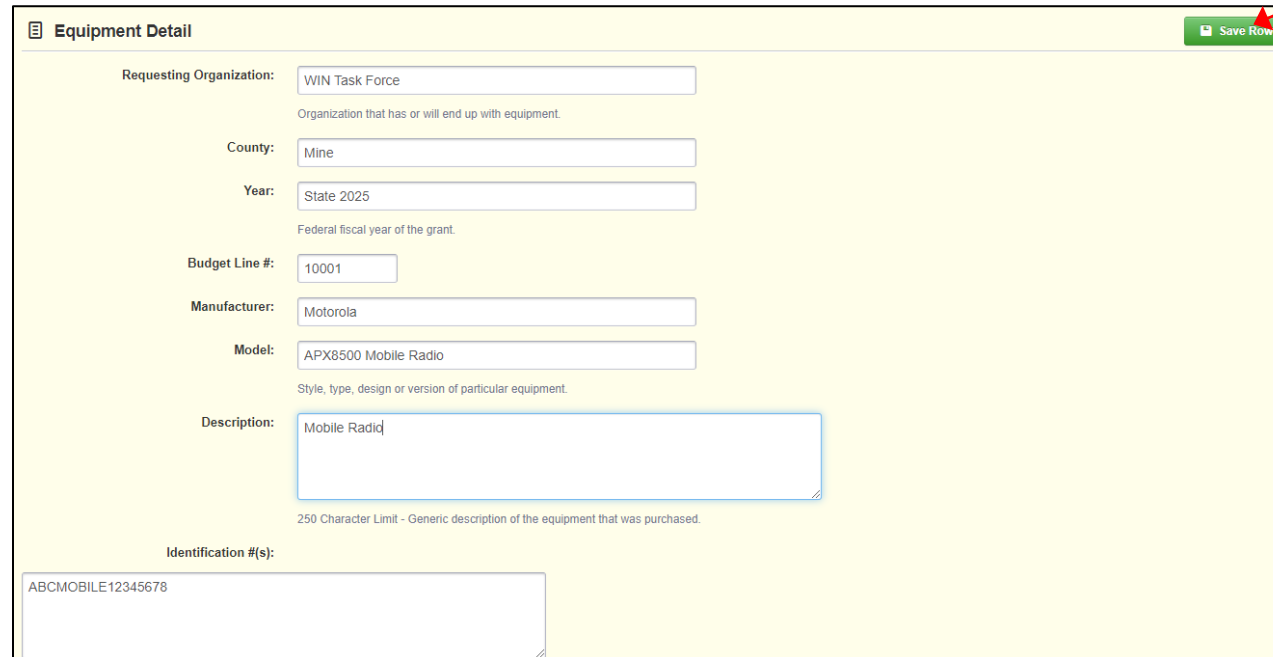
Detailed description: This is a screenshot of a web form titled 'Equipment Detail - Multi-List'. The form has a light blue header. Below the header, there is a table with multiple columns and rows. At the bottom right of the form, there are two buttons: an orange button labeled 'Mark as Complete' and a green button labeled 'Add Row'. A red arrow points to the 'Add Row' button.

Equipment Inventory cont.

- ▶ If Equipment is requested:
 - ▶ Requesting Organization - Subrecipient's Organization
 - ▶ County - Subrecipient's County
 - ▶ Year - Grant year that Equipment was purchased State 2025 or Federal 2023
 - ▶ Manufacturer - Who made the Equipment purchased
 - ▶ Model - Model Number of Equipment purchased
 - ▶ Description - What the Equipment is (i.e. Mobile Radio, Laptop or MDT)
 - ▶ Identification # (s) - Unique string of characters used for identification, such as, serial number or vehicle identification number. If there is not unique identification number for the equipment, N/A should be annotated in the box.
 - ▶ Source of Funding - Year and State or Federal Funding
 - ▶ Title Holder - Grantee Organization
 - ▶ Date of Delivery - Date that Equipment was delivered
 - ▶ Quantity - Number of items received (should always be 1)
 - ▶ Individual Items Cost - Cost of each individual item
 - ▶ % of Federal Participation in the cost - Percentage of the cost of Equipment being requested
 - ▶ Current Physical Location - Place (address) where the equipment is located, a post office box address is not a physical location for the purpose of inventory
 - ▶ Use - Local, regional, statewide, national. This is a progressive scale, if national use is indicated, it is assumed it is available at the other levels as well
 - ▶ 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 missions.

Equipment Inventory cont.

- ▶ Example
 - ▶ Each piece of equipment that is being requested for reimbursement must be completed separately
- ▶ Select “Save Row” when the form is completed



The screenshot shows a web form titled "Equipment Detail" with a yellow background. The form contains several input fields with the following values: "Requesting Organization" (WIN Task Force), "County" (Mine), "Year" (State 2025), "Budget Line #" (10001), "Manufacturer" (Motorola), "Model" (APX8500 Mobile Radio), "Description" (Mobile Radi), and "Identification #(s)" (ABCMOBILE12345678). A green "Save Row" button is located in the top right corner, with a red arrow pointing to it. The form also includes small text labels for each field: "Organization that has or will end up with equipment.", "Federal fiscal year of the grant.", "Style, type, design or version of particular equipment.", and "250 Character Limit - Generic description of the equipment that was purchased."

Equipment Detail Save Row

Requesting Organization: WIN Task Force
Organization that has or will end up with equipment.

County: Mine

Year: State 2025
Federal fiscal year of the grant.

Budget Line #: 10001

Manufacturer: Motorola

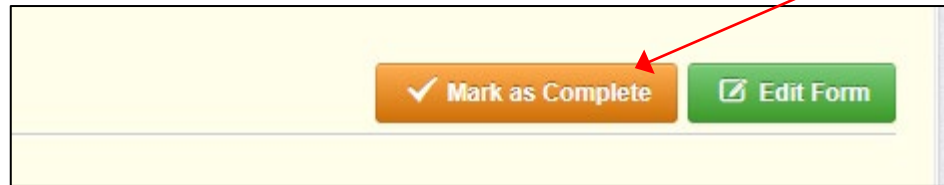
Model: APX8500 Mobile Radio
Style, type, design or version of particular equipment.

Description: Mobile Radi
250 Character Limit - Generic description of the equipment that was purchased.

Identification #(s): ABCMOBILE12345678

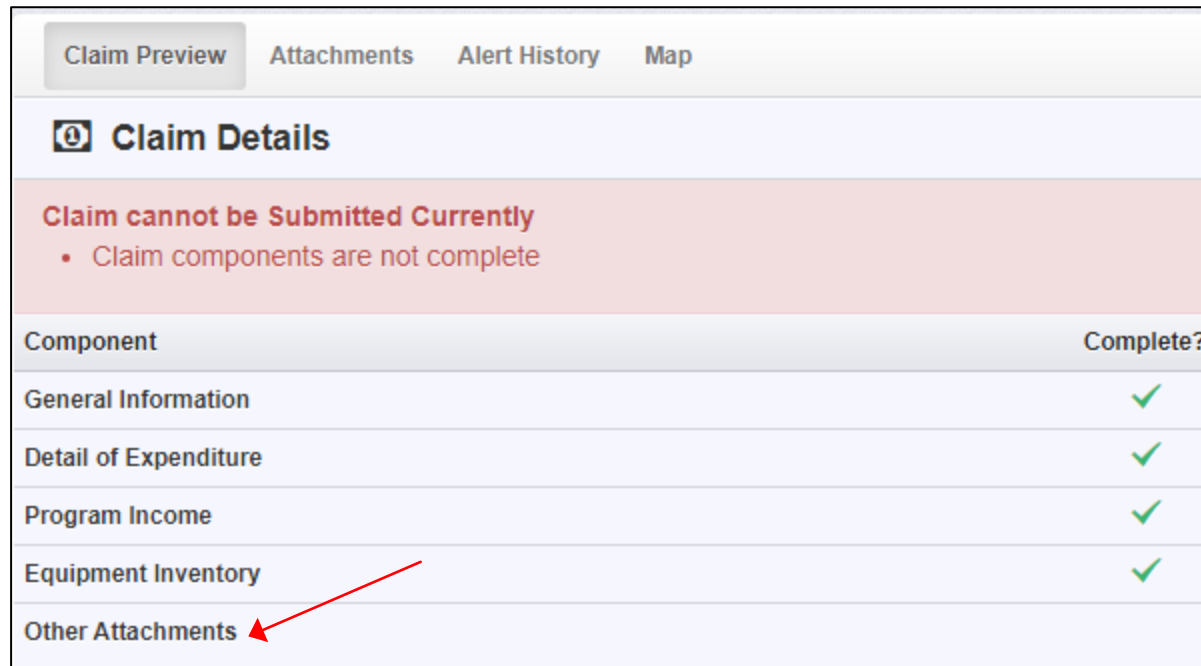
Program Income cont.

- ▶ Select “Mark as Complete”



Claim Forms

- ▶ Select “Other Attachments”

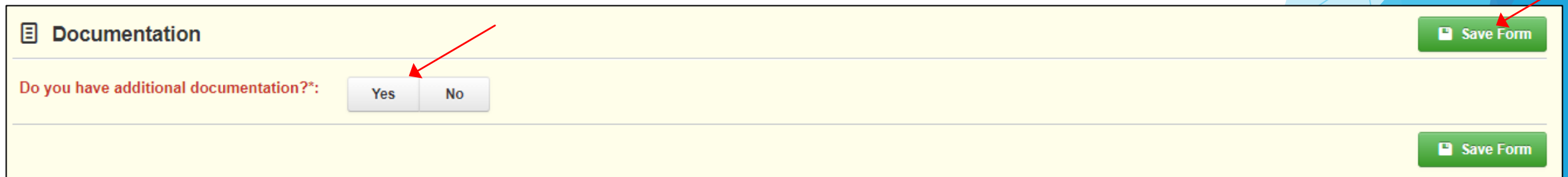


The screenshot shows a web interface for claim management. At the top, there are four tabs: "Claim Preview", "Attachments", "Alert History", and "Map". Below the tabs is a section titled "Claim Details" with a red warning message: "Claim cannot be Submitted Currently" and a bullet point: "Claim components are not complete". Below this is a table with two columns: "Component" and "Complete?". The table lists five components: "General Information", "Detail of Expenditure", "Program Income", "Equipment Inventory", and "Other Attachments". The "Other Attachments" row is highlighted in light blue, and a red arrow points to it from the left.

Component	Complete?
General Information	✓
Detail of Expenditure	✓
Program Income	✓
Equipment Inventory	✓
Other Attachments	

Other Attachments

- ▶ If you have supporting documentation to attach, select “Yes”, if not select “No”, and then select “Save Form”
 - ▶ Appropriate supporting documents could include:
 - ▶ Payroll Documentation (Paycheck Stub)
 - ▶ Timesheets or Certification form
 - ▶ Fringe Benefit Rate Sheets
 - ▶ Invoices
 - ▶ Additional Supporting Documentation (i.e. cancelled checks, and signed proof of delivery)



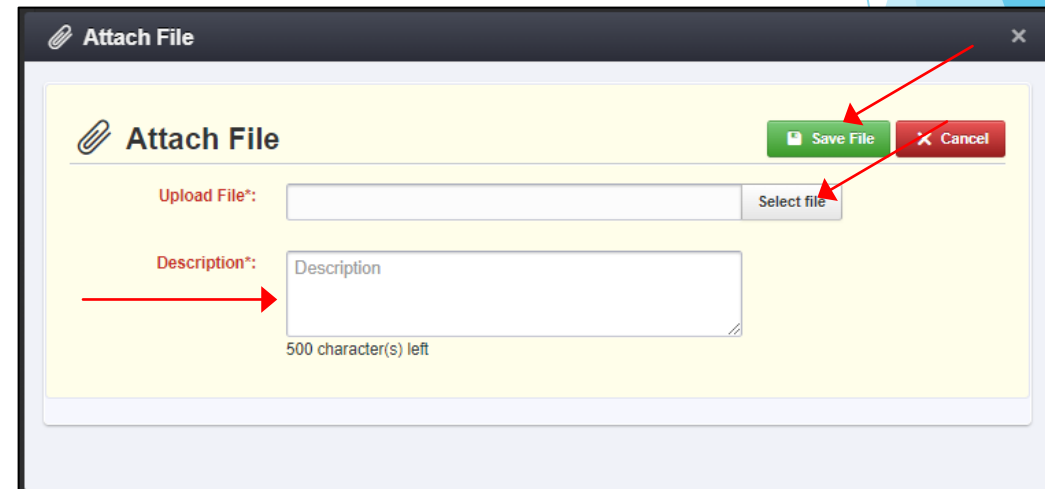
The screenshot shows a web form with a yellow background. At the top left, there is a document icon and the text 'Documentation'. On the right side, there is a green button with a document icon and the text 'Save Form'. Below this, there is a question 'Do you have additional documentation?*' in red text. Underneath the question are two buttons: 'Yes' and 'No'. A red arrow points from the 'Yes' button to the 'Save Form' button at the top right. At the bottom right, there is another green button with a document icon and the text 'Save Form'.

Other Attachments cont.

- ▶ Select “ Add New Attachment”

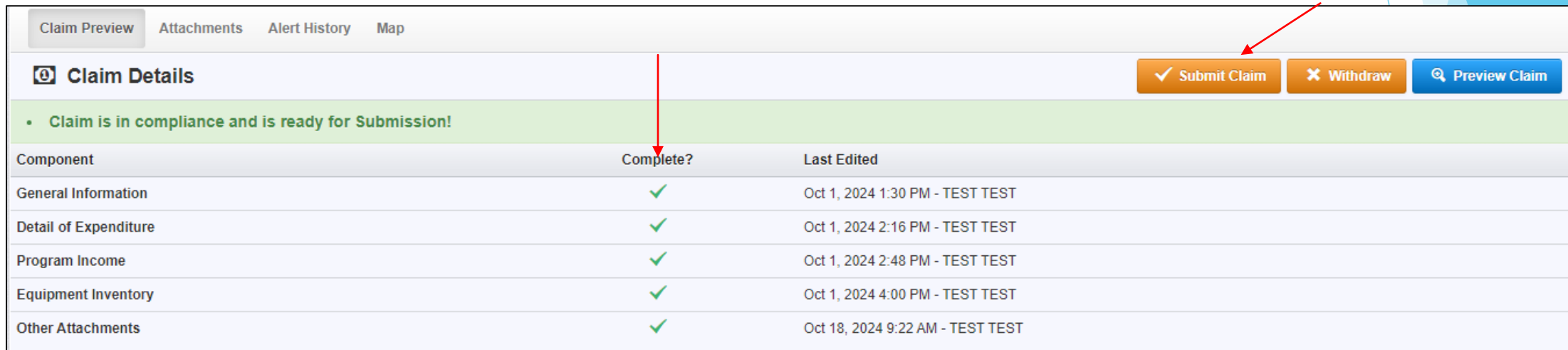


- ▶ Browse your computer for that attachment, by selecting “Select file”
- ▶ Select “Save File”
- ▶ Give a brief description of the file
- ▶ Continue the steps if you have additional documentation to added
- ▶ Select “Mark as Complete” when all files have been uploaded



Submit Claim

- ▶ After all forms on the claim have been Marked as Complete, select “Submit Claim”

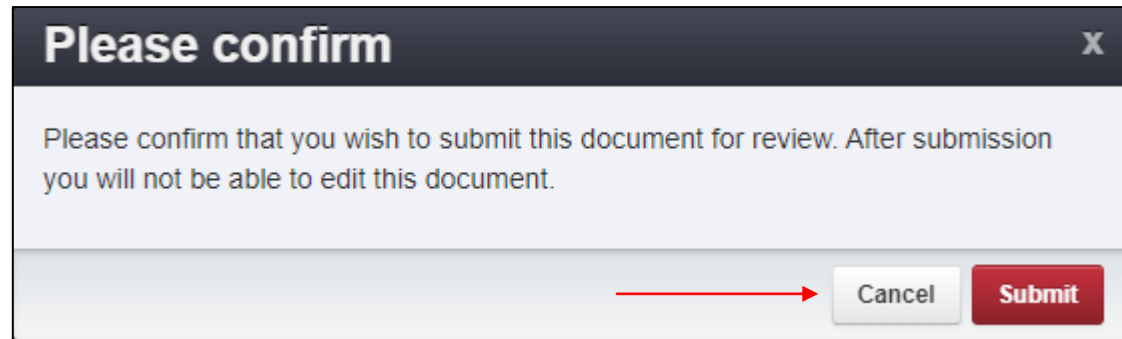


The screenshot displays a web interface for claim management. At the top, there are navigation tabs: 'Claim Preview' (selected), 'Attachments', 'Alert History', and 'Map'. Below the tabs is a header section with a camera icon and the text 'Claim Details'. On the right side of this header, there are three buttons: 'Submit Claim' (orange with a checkmark), 'Withdraw' (orange with an 'X'), and 'Preview Claim' (blue with a magnifying glass). A red arrow points from the 'Submit Claim' button to the 'Complete?' column of the table below. Below the header is a green notification bar with the text 'Claim is in compliance and is ready for Submission!'. Below the notification is a table with three columns: 'Component', 'Complete?', and 'Last Edited'. The table contains five rows of data, all with green checkmarks in the 'Complete?' column.

Component	Complete?	Last Edited
General Information	✓	Oct 1, 2024 1:30 PM - TEST TEST
Detail of Expenditure	✓	Oct 1, 2024 2:16 PM - TEST TEST
Program Income	✓	Oct 1, 2024 2:48 PM - TEST TEST
Equipment Inventory	✓	Oct 1, 2024 4:00 PM - TEST TEST
Other Attachments	✓	Oct 18, 2024 9:22 AM - TEST TEST



Submit Claim cont.

- ▶ You will receive a pop-up to confirm you want to submit the claim, select “Submit” or “Cancel”



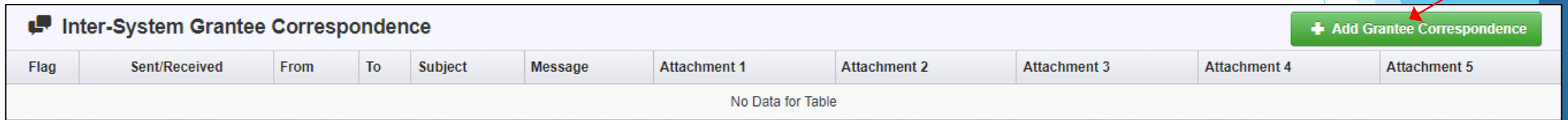
Correspondence

- ▶ All requests must be submitted through Correspondence in the Grant Component of the WebGrants System
 - ▶ Request approvals will be sent through Correspondence as well
- ▶ Select “Correspondence”

 Grant Components
The grant forms appear below. Your grant award details are saved
Component
General Information
Contact Information
Budget
Claims
Correspondence 
Subaward Adjustments
Subaward Adjustment Notices
Status Reports
Attachments
Subaward Documents - Final
Closeout
Site Visits
Funding Opportunity
Application

Correspondence cont.

- ▶ To create a new Correspondence, select “Add Grantee Correspondence”
 - ▶ The correspondence component works the same as your email account



Flag	Sent/Received	From	To	Subject	Message	Attachment 1	Attachment 2	Attachment 3	Attachment 4	Attachment 5
No Data for Table										

Correspondence cont.

- ▶ Complete the correspondence and then select, “Send Correspondence”

Inter-System Grantee Correspondence Send Correspondence

Flag:

To:

CC addresses must be entered in a valid email format, i.e. name@domain.org. Use a semicolon (;) to separate multiple CC email addresses.

CC:

Subject:

Message:

Attachment 1:

Attachment 2:

Attachment 3:

Attachment 4:

Attachment 5:

Paragraphs: 0, Words: 0, Characters (with HTML): 0

Correspondence cont.

- ▶ Reply to an email
 - ▶ Select the subject of the email

Inter-System Grantee Correspondence + Add Grantee Correspondence

Search:

Flag	Sent/Received	From	To	Subject	Message	Attachment 1	Attachment 2	Attachment 3	Attachment 4	Attachment 5
	Oct 18, 2024 9:34 AM	TEST TEST	Amelia Jaegers	test	test					

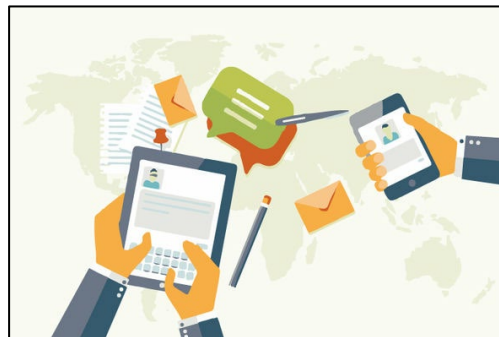
- ▶ In the open correspondence select “Reply to Message”

Inter-System Grantee Correspondence ← Reply to Message

To: Amelia Jaegers
From: TEST TEST
CC:
Subject: test
Sent/Received Date: Oct 18, 2024 9:34 AM

Correspondence cont.



- ▶ Your Grant Specialist will receive an email alert when you send correspondence through the WebGrants System
- ▶ When you receive correspondence, it will be sent to your email from dpswebgrants@dpsgrants.dps.mo.gov
- ▶ Use the WebGrants System to reply to correspondence
 - ▶ *****DO NOT REPLY TO CORRESPONDENCE FROM YOUR EMAIL*****
 - ▶ If you reply from your email the correspondence will go to a generic email box instead of your Grant Specialist, and will delay the response



Correspondence cont.

- ▶ Things that would be sent in through Correspondence
 - ▶ Questions pertaining to the grant
 - ▶ Personnel certifications
 - ▶ CTFLI certificates

Subaward Adjustments

 Grant Components
The grant forms appear below. Your grant award details are saved
Component
General Information
Contact Information
Budget
Claims
Correspondence
Subaward Adjustments 
Subaward Adjustment Notices
Status Reports
Attachments
Subaward Documents - Final
Closeout
Site Visits
Funding Opportunity
Application

Subaward Adjustments cont.

- ▶ Subaward Adjustments are required for:
 - ▶ Budget Modifications
 - ▶ Prior written approval from DPS is required for budget modifications. A budget modification is a transfer among existing budget lines within the grant budget (i.e. transferring funds from an existing budget line to another existing budget line)
 - ▶ A request for a budget modification must be submitted through WebGrants as a subaward adjustment and **must be** approved by DPS prior to the subrecipient obligating or expending the grant funds

Subaward Adjustments cont.

▶ Program Changes

- ▶ A request for program changes must be submitted through WebGrants as a subaward adjustment and must be approved by DPS. Program changes include changes in subrecipient staff, authorized officials, project directors, fiscal officers or officers in charge. Additional changes may include address change or any other information in the organization component in WebGrants
- ▶ A request to change the project period of performance



Subaward Adjustment cont.

▶ Scope of Work Changes

- ▶ A subrecipient requesting changes to the scope of work described in its grant award, must contact DPS for approval to make this change. A change to a subrecipient's scope of work means:
 - ▶ Adding new line items to the approved budget
 - ▶ Changes in the quantity of an existing line item in the approved budget
 - ▶ Changes to the specifications of an existing line item in the approved project budget (i.e. an equipment line item on the approved budget lien lists a 12x20 tent, in order to purchase a tent that is 10x10 instead of the listed equipment, prior approval would be required)

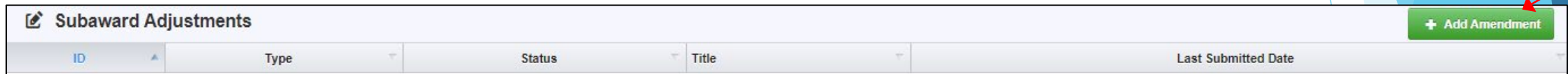
Subaward Adjustment cont.

- ▶ Select “Subaward Adjustments”

 Grant Components
The grant forms appear below. Your grant award details are saved
Component
General Information
Contact Information
Budget
Claims
Correspondence
Subaward Adjustments 
Subaward Adjustment Notices
Status Reports
Attachments
Subaward Documents - Final
Closeout
Site Visits
Funding Opportunity
Application

Subaward Adjustment cont.

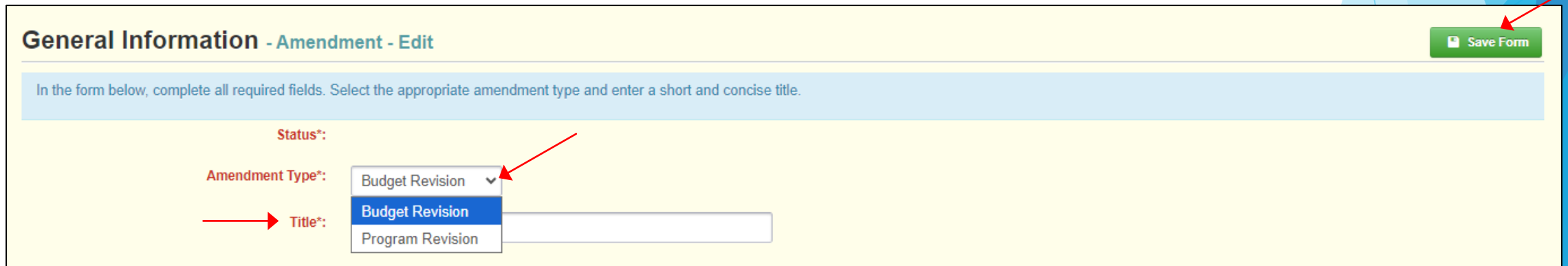
- ▶ Select “Add Adjustment”



Subaward Adjustments + Add Amendment

ID	Type	Status	Title	Last Submitted Date
----	------	--------	-------	---------------------

- ▶ Select from the drop-down the “Amendment Type” and give a brief “Title”
 - ▶ Select “Save Form”



General Information - Amendment - Edit Save Form

In the form below, complete all required fields. Select the appropriate amendment type and enter a short and concise title.

Status*:

Amendment Type*:

→ Title*:

Budget Revision
Budget Revision
Program Revision

Subaward Adjustments cont.

- ▶ Subaward Components
 - ▶ General Information
 - ▶ Justification
 - ▶ Budget
 - ▶ Confirmation
 - ▶ Attachments
- ▶ Each component must have a “Check Mark” in the “Complete” column

✎ Amendment Details	
For all Budget Adjustment Requests, please provide a full justification of why you are requesting the change.	
For all Programmatic Requests, please provide a full justification regarding the requested changes to the program.	
Amendment cannot be Submitted Currently <ul style="list-style-type: none">• Amendment components are not complete	
Component	Complete?
General Information	✓
Justification	
Budget	
Confirmation	
Attachments	

Budget Modifications/Scope of Work Changes

- ▶ Contact your Grant Specialist for the excel spreadsheet that should be used, or you can create your own to mirror the example (Budget Revisions, only)

Project	Line Number	Current Budget	Requested Change	Updated Budget	Description
					Moving funds from the Portable Radio budget line to the Mobile Radio Budget line to cover costs
22	1001	\$ 100,000.00		\$ 100,000.00	
22	2001	\$ 25,000.00		\$ 25,000.00	
22	3001	\$ 20,000.00		\$ 20,000.00	
22	4001	\$ 5,000.00		\$ 5,000.00	
22	9001	\$ 45,000.00		\$ 45,000.00	
			\$		
22	10001	\$ 7,000.00	(\$ 500.00)	\$ 6,500.00	
22	10002	\$ 5,000.00	\$ 500.00	\$ 5,500.00	
22	11001	\$ 7,500.00		\$ 7,500.00	
22	12001	\$ 6,000.00		\$ 6,000.00	
		\$ 220,500.00		\$ 220,500.00	

Budget Modifications/Scope of Work Changes cont.

- ▶ Justification in WebGrants System
 - ▶ Copy the spreadsheet into WebGrants' Justification with the reason(s) for the requested change

[Mark as Complete](#) | [Return to Components](#)

Justification

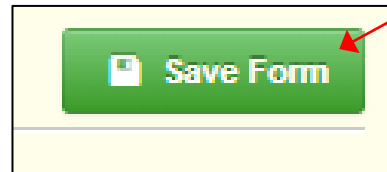
Please explain the reason for the requested adjustment and include the effective date. State the need for the change and how the requested revision will further the objectives of the project.

The Portable radio cam in under budgeted amount and the Mobile radio was more that the quote provided.

Line Project	Number	Current Budget	Requested Change	Updated Budget	Description
22	1001	\$ 100,000.00		\$ 100,000.00	Moving funds from the Portable Radio budget line to the Mobile Radion Budget line to cover costs
22	2001	\$ 25,000.00		\$ 25,000.00	
22	3001	\$ 20,000.00		\$ 20,000.00	
22	4001	\$ 5,000.00		\$ 5,000.00	
22	9001	\$ 45,000.00		\$ 45,000.00	
22	10001	\$ 7,000.00	\$ (500.00)	\$ 6,500.00	
22	10002	\$ 5,000.00	\$ 500.00	\$ 5,500.00	
22	11001	\$ 7,500.00		\$ 7,500.00	
22	12001	\$ 6,000.00		\$ 6,000.00	
		\$ 220,500.00		\$ 220,500.00	

Budget Modifications/Scope of Work Changes cont.

- ▶ Select “Save Form”



- ▶ Select “Mark as Complete”



Budget Modifications/Scope of Work Changes cont.

- ▶ Select “Budget”

Amendment Preview Attachments Alert History Map

Amendment Details

For all Budget Adjustment Requests, please provide a full justification of why you are requesting the changes

For all Programmatic Requests, please provide a full justification regarding the requested changes to the gra

Amendment cannot be Submitted Currently

- Amendment components are not complete

Component	Complete?
General Information	✓
Justification	✓
Budget	
Confirmation	
Attachments	

Budget Modifications/Scope of Work Changes cont.

- ▶ Budget cont.
 - ▶ Adjust the budget line to mirror the changes that are to occur
 - ▶ Make sure to update the Total Federal/State Share amounts

Budget - Edit Save 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	100000.00	100000.00	
Personnel Benefits	25000.00	25000.00	
Personnel Overtime	20000.00	20000.00	
Personnel Overtime Benefits	5000.00	5000.00	
Volunteer Match	\$0	\$0	
Travel/Training	4500.00	45000.00	
Equipment	12000.00	12000.00	
Supplies/Operations	7500.00	7500.00	
Contractual	6000.00	6000.00	
Renovation/Construction	\$0	\$0	
Indirect Costs	\$0	\$0	
Total	\$0.00	\$0.00	\$0.00

Federal/State and Local Match Share - Edit Save Grid

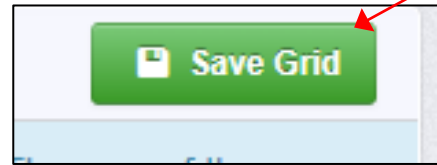
- The Current Budget column represents the current subaward. Enter the total federal/state share and total local match share as it is reflected in the current version of the Budget component. The sum of the federal/state share and the local match share should equal the total of the Current Budget column 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	220500		220500.00		
Total Local Match Share	\$0		\$0		

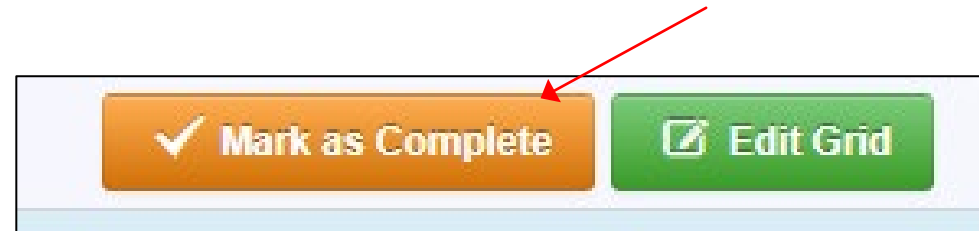
Budget Modifications/Scope of Work Changes cont.

- ▶ Budget cont.

- ▶ Select “Save Grid”



- ▶ Select “Mark as Complete”



Budget Modifications/Scope of Work Changes cont.

▶ Select “Confirmation”

Amendment Preview Attachments Alert History Map

Amendment Details

For all Budget Adjustment Requests, please provide a full justification of why you are requesting to move.

For all Programmatic Requests, please provide a full justification regarding the requested changes.

Amendment cannot be Submitted Currently

- Amendment components are not complete

Component	Complete?
General Information	✓
Justification	✓
Budget	✓
Confirmation	
Attachments	

▶ Complete the form

Confirmation

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

Authorized Official Name*:

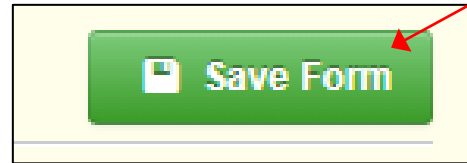
Title*:

Date*:

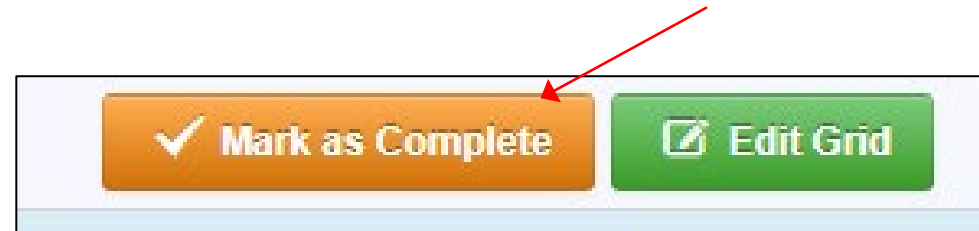
Budget Modifications/Scope of Work Changes cont.

- ▶ Budget cont.

- ▶ Select “Save Form”



- ▶ Select “Mark as Complete”



Budget Modifications/Scope of Work Changes cont.

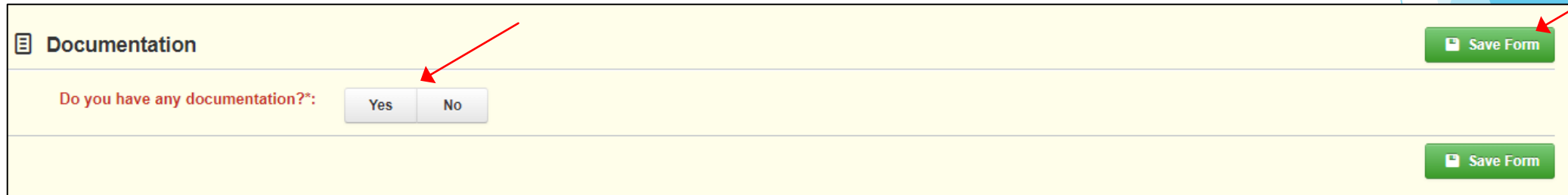
- ▶ Select “Attachments”
 - ▶ Which could include new quotes

The screenshot shows a web interface for 'Amendment Preview'. It has tabs for 'Amendment Preview', 'Attachments', 'Alert History', and 'Map'. The main content area is titled 'Amendment Details' and contains instructions for providing justification for budget adjustments and programmatic requests. A red error message states 'Amendment cannot be Submitted Currently' with the reason 'Amendment components are not complete'. Below this is a table with two columns: 'Component' and 'Complete?'. The table lists five components: General Information, Justification, Budget, Confirmation, and Attachments. The first four are marked as complete with green checkmarks, while Attachments is not. A red arrow points to the 'Attachments' row.

Component	Complete?
General Information	✓
Justification	✓
Budget	✓
Confirmation	✓
Attachments	

Attachments

- ▶ If you have supporting documentation to attach, select “Yes”, if not select “No”, and then select “Save Form”



The screenshot shows a form section with a yellow background. At the top left, there is a header "Documentation" with a list icon. In the center, there is a question "Do you have any documentation?*" followed by two buttons: "Yes" and "No". At the top right, there is a green "Save Form" button. At the bottom right, there is another green "Save Form" button. Red arrows point to the "Yes" button and the top-right "Save Form" button.

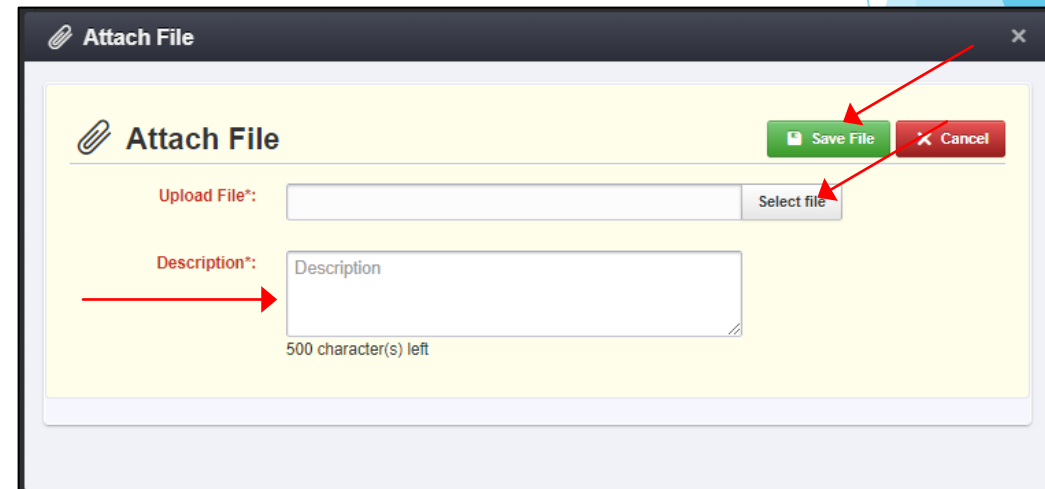
Documentation	<input type="button" value="Save Form"/>
Do you have any documentation?*	<input type="button" value="Yes"/> <input type="button" value="No"/>
	<input type="button" value="Save Form"/>

Attachments cont.

- ▶ Select “ Add New Attachment”



- ▶ Browse your computer for that attachment, by selecting “Select file”
- ▶ Select “Save File”
- ▶ Give a brief description of the file
- ▶ Continue the steps if you have additional documentation to added
- ▶ Select “Mark as Complete” when all files have been uploaded



Submit Claim

- ▶ After all forms on the Subaward Adjustment have been marked as completed, select “Submit Amendment”

Amendment Preview Attachments Alert History Map

Amendment Details ✓ Submit Amendment ✕ Withdraw 📄 Copy 🔍 Preview Amendment

For all Budget Adjustment Requests, please provide a full justification of why you are requesting the changes. Please also fill out the Subaward Adjustment Spreadsheet to show the amount of funds you are requesting to move.

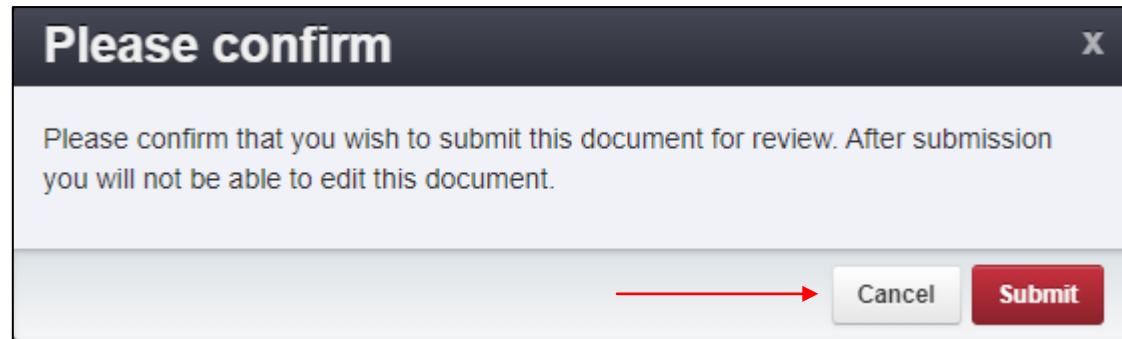
For all Programmatic Requests, please provide a full justification regarding the requested changes to the grant. Programmatic Changes include all personnel and grant contact changes.

- **Amendment is in compliance and is ready for Submission!**


Component	Complete?	Last Edited
General Information	✓	Oct 18, 2024 9:57 AM - TEST TEST
Justification	✓	Oct 18, 2024 10:03 AM - TEST TEST
Budget	✓	Oct 18, 2024 10:26 AM - TEST TEST
Confirmation	✓	Oct 18, 2024 10:30 AM - TEST TEST
Attachments	✓	Oct 18, 2024 10:35 AM - TEST TEST

Submit Claim cont.

- ▶ You will receive a pop-up to confirm you want to submit the subaward adjustment, select “Submit” or “Cancel”



Status Reports

 Grant Components
The grant forms appear below. Your grant award details are saved
Component
General Information
Contact Information
Budget
Claims
Correspondence
Subaward Adjustments
Subaward Adjustment Notices
Status Reports ←
Attachments
Subaward Documents - Final
Closeout
Site Visits
Funding Opportunity
Application

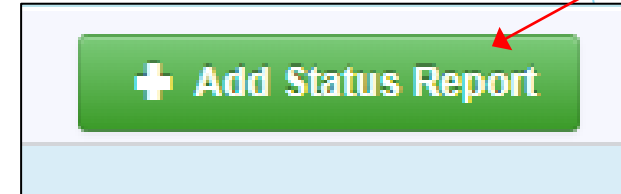


Status Reports cont.

- ▶ Each Status Reports must be completed through the WebGrants System
- ▶ Your agency must submit a Quarterly Status Report
 - ▶ Due Dates
 - ▶ October 10, 2024 (July 1 - September 30, 2024)
 - ▶ January 10, 2025 (October 1 - December 31, 2024)
 - ▶ April 10, 2025 (January 1 - March 31, 2025)
 - ▶ July 10, 2025 (April 1 - June 30, 2025)

Status Reports cont.

- ▶ To create a Status Report, select “Add Status Report”
- ▶ Complete the General Information
- ▶ Select “Save Form”



General Information - Status Report - Edit Save Form

In the form below, complete all required fields. Enter the period of coverage for the information detailed on this report. Select the starting day and the ending day. All statuses and activity reported on this report should have occurred during this period of time.

Status*:

Sub Type*: Quarterly Report ▾

Title:

Report Dates*:

Start Date End Date

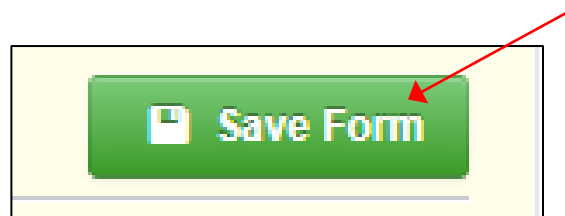
A screenshot of a web form titled "General Information - Status Report - Edit". The form has a light yellow background. At the top right, there is a green "Save Form" button. Below the title, there is a blue instruction box. The form contains several fields: "Status*" (empty), "Sub Type*" (a dropdown menu showing "Quarterly Report"), "Title" (a text input field), and "Report Dates*" (two date input fields, one with "07/01/2024" and one with "09/30/2024"). Below the date fields are labels "Start Date" and "End Date". Three red arrows point to the "Add Status Report" button, the "Sub Type*" dropdown, and the "Report Dates*" fields.

Status Report cont.

- ▶ Complete the “Drug Task Force” component

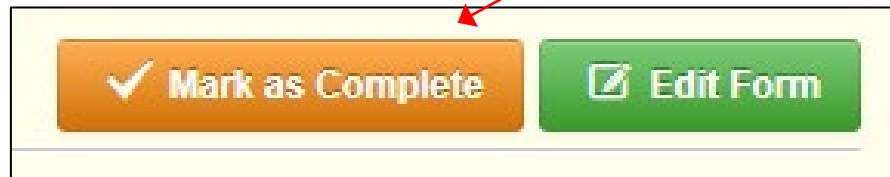
Component	Complete?
General Information	✓
Drug Task Force	

- ▶ Select “Save Form”



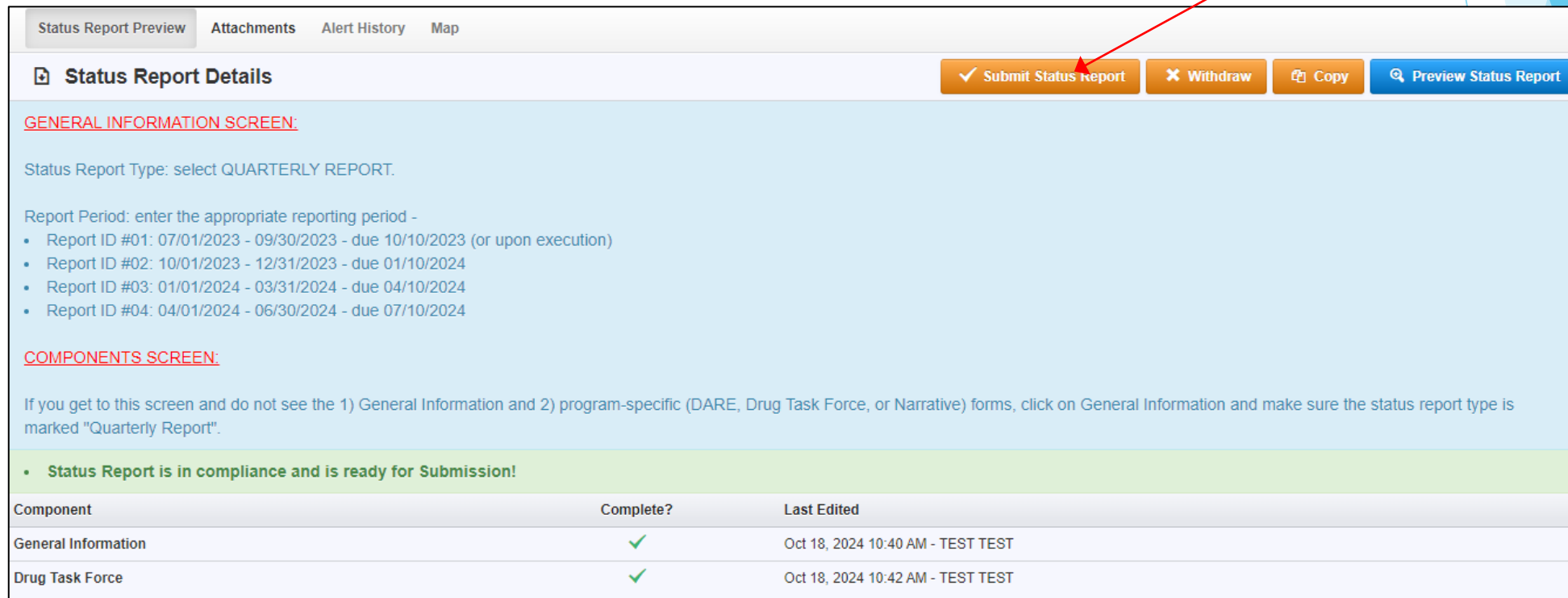
Status Reports cont.

- ▶ Select “Mark as Complete”
 - ▶ **NOTE:** None of the fields are marked as “required” to allow you to save the form without having each field completed; however, you are asked to enter data in EVERY field prior to submission



Submit Status Reports

- ▶ Select “Submit Status Report” once all components have been marked as complete



The screenshot displays the 'Status Report Details' interface. At the top, there are tabs for 'Status Report Preview', 'Attachments', 'Alert History', and 'Map'. Below the tabs, the title 'Status Report Details' is shown on the left, and a row of action buttons is on the right: 'Submit Status report' (orange with a checkmark icon), 'Withdraw' (orange with an 'X' icon), 'Copy' (orange with a copy icon), and 'Preview Status Report' (blue with a magnifying glass icon). A red arrow points to the 'Submit Status report' button.

GENERAL INFORMATION SCREEN:

Status Report Type: select QUARTERLY REPORT.

Report Period: enter the appropriate reporting period -

- Report ID #01: 07/01/2023 - 09/30/2023 - due 10/10/2023 (or upon execution)
- Report ID #02: 10/01/2023 - 12/31/2023 - due 01/10/2024
- Report ID #03: 01/01/2024 - 03/31/2024 - due 04/10/2024
- Report ID #04: 04/01/2024 - 06/30/2024 - due 07/10/2024

COMPONENTS SCREEN:

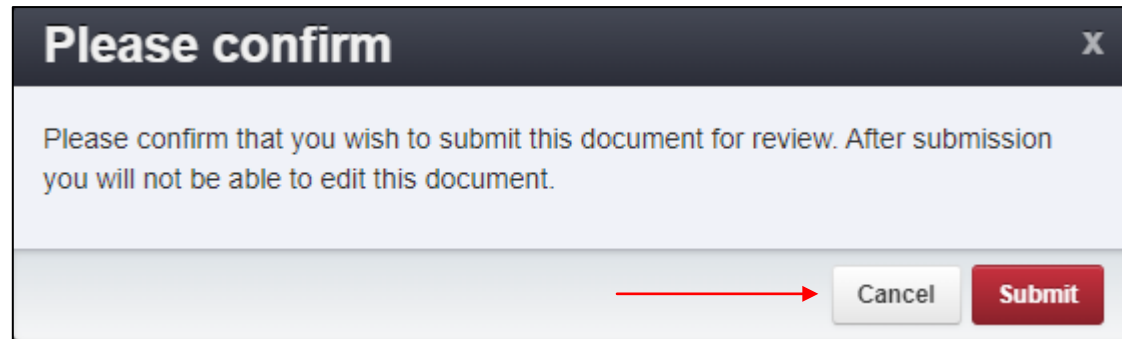
If you get to this screen and do not see the 1) General Information and 2) program-specific (DARE, Drug Task Force, or Narrative) forms, click on General Information and make sure the status report type is marked "Quarterly Report".

• **Status Report is in compliance and is ready for Submission!**

Component	Complete?	Last Edited
General Information	✓	Oct 18, 2024 10:40 AM - TEST TEST
Drug Task Force	✓	Oct 18, 2024 10:42 AM - TEST TEST

Submit Status Report cont.

- ▶ You will receive a pop-up to confirm you want to submit the status report, select “Submit” or “Cancel”



Monitoring

- ▶ We will no longer be Site Visiting 100% of subrecipients every year
- ▶ You will be notified when your agency is chosen for Site Visit Monitoring
- ▶ Key things to remember
 - ▶ Monitoring is NOT an audit
 - ▶ DPS Grants is NOT monitoring to catch error - we are monitoring to help correct area of noncompliance to prevent audit findings
 - ▶ Change to provide technical assistance and answer questions

Monitoring cont.

- ▶ Why do we have to monitor?
 - ▶ 2 CFR 200.328(a) states, “The non-Federal entity is responsible for oversight of the operations of the Federal award supported activities. The non-Federal entity must monitor its activities under federal awards to assure compliance with applicable Federal requirements and performance expectations are being achieved.”
 - ▶ 2 CFR 200.331(d) 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.”

What Documents Guide Monitoring

- ▶ 2 CFR part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards
- ▶ Applicable State of Missouri statutes and regulations
- ▶ DPS Financial and Administrative Guidelines
- ▶ DPS Grants Information Bulletins
- ▶ FY 2024 DTF Notice of Funding Opportunity
- ▶ FY 2024 DTF Certified Assurances
- ▶ FY 2024 DTF Subaward Agreement

Types of Monitoring

▶ Desk Monitoring

- ▶ Review which is completed by DPS Grants - telephone and email communication, grant document review, reports and correspondence



▶ On-Site Monitoring

- ▶ Review which is conducted by the DPS Grants at the subrecipient's agency - policy review, property records, etc.



What to Expect During Monitoring

- ▶ The DPS Grants is required to monitor the following, as applicable
 - ▶ LEA Statutory Requirements
 - ▶ Equipment (inventory control, tags/labels)
 - ▶ Policies and Procedures
 - ▶ Project Implementation
 - ▶ Federal Civil Rights Compliance
 - ▶ State Civil Rights Compliance

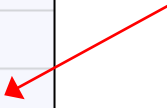
What to Expect During Monitoring - LEA Statutory Requirements

- ▶ Section 590.650 RSMo - Vehicle Stops Reporting
 - ▶ DPS will verify with the Attorney General's Officer
- ▶ Section 590.700 RSMo - Recording of Custodial Interrogations
 - ▶ Must present DPS with a copy of the written policy
- ▶ Section 43.544 RSMo - Forwarding Intoxication-Related Offences
 - ▶ Must present DPS with a copy of the written policy
- ▶ Section 590.1265 RSMo - Police Use of Force Transparent Act of 2021
 - ▶ DPS will receive the report form MO Hwy Patrol
- ▶ Section 43.505 RSMo - National Incident-Based Reporting System (NIBRS)
formerly Uniform Crime Reporting (UCR)
 - ▶ DPS will receive the report form MO Hwy Patrol

What to Expect During Monitoring - Programmatic

- ▶ Project Implementation
- ▶ Personnel/Standard Operating Procedures Manual, if applicable
- ▶ Equipment inventory control list, if applicable
 - ▶ Tags/label on equipment
 - ▶ The Equipment Inventory component within your Claim will be used as an inventory control list

Component
General Information
Detail of Expenditure
Program Income
Equipment Inventory
Other Attachments



What to Expect During Monitoring - Financial

- ▶ Local procurement/purchasing policy, if applicable
- ▶ Bid/quote records, if applicable
- ▶ Sole source letters, if applicable

What to Expect During Monitoring - Federal and State Civil Rights

- ▶ EEO Plan - even if your agency is not chosen for monitoring this report needs to be completed EVERY year
- ▶ Non-Discrimination Policies and Procedures
- ▶ Access to Limited English Proficiency (LEP) services
- ▶ Civil Rights Training
- ▶ Subrecipients are required by federal and state law to display labor poster regarding these statutes, which can be found at: <https://labor.mo.gov/posters>

Common Areas of Non-Compliance and Recommendations

- ▶ LEA Statutory Requirements
 - ▶ Missing report submissions
 - ▶ Missing copies of written policies
- ▶ Equipment
 - ▶ Missing equipment inventory information
 - ▶ Equipment items missing tags/labels
 - ▶ Usage logs not containing all required information

Common Areas of Non-Compliance and Recommendations cont.

- ▶ Federal Civil Rights
 - ▶ Missing policies
 - ▶ EEO Plan not complete
 - ▶ EEO Certification Form not complete
- ▶ State Civil Rights
 - ▶ No display of labor posters

Pass-Through Entity Monitoring Requirements

- ▶ As a pass-through entity, you are also required to monitor each subrecipient
- ▶ Forward the monitoring report to DPS Grants through the Correspondence component of WebGrants

Contact

For assistance, please contact your Grant Specialist

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