



Perkins Budget Workbook



Perkins Budget Workbook

Areas completed by CSI and released to school after budget approval from CCCS

Colorado Charter School Institute											
Perkins Prelim Allocation:	\$	108,259.00									
Total Spent	\$	39,270.27									
Funds Remaining	\$	68,988.73									
Action Step #	School	Project Name	Spending Category	Detailed Action Step	Item	Serial # Reporting	Allocation	Voucher 1 Due 03/09/19	Voucher 2 Due 03/09/19	Total Spent to Date	Remaining Funds
101		Parenting	Travel	Conference registration and travel for the Parenting instructor and CTSD advisor to attend the the CATFACS Conference to improve their training and supporting in implementing best practices and meeting FACS standards and program requirements. This will allow CTE instructors to stay relevant with current research and best practices. Implementation action plans will be created and shared with administration and advisory.	CATFACS Conference January 2019 registration and travel (2)	N/A	\$ 1,500.00		\$ 451.20	\$ 451.20	\$ 1,048.80
102		Parenting	Salary	Provide substitute teachers for CTE staff to attend the CATFACS Conference in January 2019. Two substitutes for two days.	Substitutes for CATFACS January 2019	N/A	\$ 800.00		\$ 162.80	\$ 162.80	\$ 637.20
103		Parenting	Other	Provide honorariums for four to six guest speakers in the parenting 101 and child development classes to provide parenting students access to diverse role models who were teen parents and/or who work in business and industry related to childcare, child development and health of young children.	Guest speaker honorariums	N/A	\$ 1,500.00			\$ -	\$ 1,500.00
104		Construction	Other	Purchase at DeWalt Planer (\$599) and Bottom Cleaning Bit (\$22) for the Construction program at CECFC. Students will be able to make decisions on the purchase of a milled piece of wood versus one in which they can use the planer and calculate cost savings. They will learn safety procedures and proper techniques and technical skills when using the planer on a variety of wood.	DeWalt Planer & Bottom Cleaning Bit	Yes - Report in Serial # Tab	\$ 622.00		\$ 1,732.50	\$ 1,732.50	\$ (1,110.50)
105		Construction	Other	Purchase 12 chisels (\$102), one sharpening wheel (\$200), one Diamond Hone (\$14) and guide (\$12), 30 clamp kits (\$290) and 2 push blocks (\$10) for the Construction program at CECFC. Students will learn proper care, use and preventative maintenance of hand tools completing a job where time, space or budget does not allow use of power tools. They will learn how to design and create fine woodworking projects including techniques and technical skills of sanding, routing, planing and	Hand Tools	Yes - Report in Serial # Tab	\$ 627.00			\$ -	\$ 627.00
106		Construction	Other	Purchase a Grizzly H2336 Downdraft table (\$890) and a Dayton Central Dust Collector (\$3857) for the Construction program at CECFC. Students will be able to complete projects on a clean, safe sanding environment. Students will learn construction techniques and technical skills of roofing, framing, flooring and dry wall. They will learn how to design and create construction	Grizzly Downdraft Table & Dayton Central Dust Collector	Yes - Report in Serial # Tab	\$ 4,747.00			\$ -	\$ 4,747.00
107		Construction	Other	Purchase an oscillating spindle sander (\$175) for the CECFC Construction Program. Students will learn the following technical skills: to remove material slowly and methodically to reach desired shape; to sand down lumber to fine tune final fit with other pieces of lumber in an assembly; to sand lumber with progressively finer grit sanding spindles to reach desired surface finish; and to replace sanding drums as needed, practicing proper tool care and preventative maintenance.	Oscillating Spindle Sander	Yes - Report in Serial # Tab	\$ 175.00			\$ -	\$ 175.00
				Purchase 5 Combination Squares (\$25), a miter saw stop/ence (\$140), drill bits (\$73) and a jet lathe model 1221VS (\$850) for the Construction program at CECFC. Students will incorporate							

*Expenses 07/01/18 through 09/30/18



Perkins Budget Workbook

Categories

Action Step #	School	Project Name	Spending Category	Detailed Action Step	Item	Serial # Reporting	Allocation	Voucher 1 Due 01/09/19	Voucher 2 Due 03/09/19	Total Spent to Date	Remaining Funds
101		Parenting	Travel	Conference registration and travel for the Parenting instructor and CTSD advisor to attend the the CATFACS Conference to improve their training and supporting in implementing best practices and meeting FACS standards and program requirements. This will allow CTE instructors to stay relevant with current research and best practices. Implementation action plans will be created and shared with administration and advisory	CATFACS Conference January 2019 registration and travel (2)	N/A	\$ 1,500.00		\$ 451.20	\$ 451.20	\$ 1,048.80
102		Parenting	Salary	Provide substitute teachers for CTE staff to attend the CATFACS	Substitutes for CATFACS		\$ 800.00		\$ 162.80	\$ 162.80	\$ 637.20

Colorado Charter School Institute

Perkins Prelim Allocation: \$ 108,259.00

Total Spent \$ 39,270.27

Funds Remaining \$ 68,988.73

*Expenses 07/01/18 through 09/30/18

Approved item

Budget for item

Asset tracking

Voucher request areas

- Approved item – describes the allowable purchase
- Allocation – individual allocation approved for each item
- Asset tracking – indicates if asset tracking is required
- Voucher areas – area where school requests are made for reimbursements



Perkins Budget Workbook

Asset Tracking

Actions Step # (column A) ▼	Item Description (column F) ▼	Serial/Asset Tag Number ▼

Asset tracking information is entered into the *Serial #'s* tab.

Serial numbers are required when available.



Perkins Budget Workbook

RFF Form

- ▶ Must be signed by the school leader, Chief Financial Officer, or a board member as the authorized representative
- ▶ Someone other than the authorized representative must prepare the report
- ▶ CSI requires recipients to draw down funds during every Voucher period

8001
Charter Schools Institute
REQUEST FOR FUNDS FORM
FY 2018-19

GRANT NAME

School Name
School Location Code

INSTRUCTIONS: Submit one copy of the form with the appropriate backup documentation by the 9th (or the next business day if the 9th falls on a weekend or holiday) of each month during the fiscal year.

Request Number: RFF 1

Request Amount Total: Enter Request Amount Here

Comments:

Section 1 - EXPENDITURE AND FUNDS REQUESTED SUMMARY		Amount
	Actuals	
A. Allocation	149,895.00	
B. N/A	0	
C. Program Budget Approved	149,895.00	
D. District Expenditures to date <small>(do not include obligations, encumbrances or salaries accrued but not yet disbursed)</small>		\$ 0
E. N/A		\$ 0
F. N/A		\$ 0
G. Previously requested funds - Current Allocation portion <small>(Sum of all previous requests should be entered here)</small>		\$ 0
H. Lines D+E minus Lines F+G = Line H <small>(= Total amount of current request — Confirm that this amount matches the above RFF Amount Total at the top)</small>		\$ 0

Authorized Representative

I, _____, hereby certify, to the best of my knowledge and belief that the report is true, correct, and accurate, and that the funds requested are for the purposes and objectives set forth in the terms and conditions of the federal award. I am aware that any false, fictitious, or fraudulent information or the omission of any material fact, may subject me to criminal civil or administrative penalties for fraud, false statements, false claims, or otherwise.

Signature of Authorized Representative/Requestor _____ Date _____

Print or Type Name & Title of Authorized Representative/Requestor _____

Print or Type Name of Person Preparing Report _____ Phone # and Extension _____

Submit by Email or Fax: Email: RFF@csi.state.co.us Fax: 303-886-2530 Note: If faxing, please email the RFF inbox to notify and confirm receipt.	Requestor: Is the budget included? Is the request(s) highlighted? Is the appropriate backup included? Is the Program Connection included?	Office Use Only Program Approval: Fiscal Approval: Notes:
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Total program expenditures to date are entered here

Previously requested Funds here

Signature area



Federal Funds Back-up Documentation

Uniform Grant Guidance

Forms of Back-up



Salary

- Payroll Summary
- Time & Effort/Federal Funds Form



Item Purchases

- Invoice
- Proof of Payment
- Packing Slip
- Serial Number (equipment only)



Purchased Services

- Invoice
- Signed Contract
- Proof of Services
- Proof of Payment



Uniform Grant Guidance

Annual Federal Funds Form

Federal Program Employee Certification Form		
FUNDING CERTIFICATION FORM		
Instructions: Employees working entirely on a single cost objective during the report period are required to complete this certification form prior to reimbursement. This certification must be signed by the employee and a supervisor. The form must be made available to state and federal auditors upon request.		
Purpose of Form: OMB Circular A-87 requires employees who are compensated by federal grant dollars and work solely on a single award or cost objective to submit a <u>certification</u> that the employee worked solely on that program for the period covered by the certification.		
Location:	Contact Person:	
Time Reporting Period:	Beginning: Ending:	
I certify that 100% of my work time during this time period was spent on the <u>federally</u> funded program listed below:		
Employee Name	Position	Cost Objective Funded by
Employee Signature	Supervisor's Signature	
Printed Name	Printed Name	
Date	Date	

Time and Effort Versus Annual Federal Funds form

Difference of objectives not funding source

- Employees working entirely on a single program objective during the reporting period may complete this certification on an annual basis.
- This certification must be signed by the employee and a supervisor. The form must be made available to state and federal auditors upon request.

<https://resources.csi.state.co.us/financial-services-library>



Uniform Grant Guidance

Time and Effort Form

You must have the daily hours filled-in

You must include the objective and percentage of time worked on objective

Monthly Employee Time and Effort Report
August 2017

Employee Name: **Marcie** Employee ID Number: **997115433**

Enter Percent of Time Worked for the Month

Day	Date	Enter Time Worked	Leave Tracking							Daily Totals	Cost objective/funding source #1	Cost objective/funding source #2	Cost objective/funding source #3	Cost objective/funding source #4	Cost objective/funding source #5	Total Percentage for the Month
			FLSA Total	HOL	VAC	SICKS	SICKF	PERS	OTHER							
S	29								0.00	Title IA DACA4010						25%
S	30								0.00							
M	31								0.00	Title IIIA DACA4385						5%
T	1	8.00							8.00							
W	2	8.00							8.00							
TH	3					8.00			8.00							
F	4	8.00	24.00						8.00							
S	5								0.00	Cost objective/funding source #3 IDEA DACA4027						10%
S	6								0.00							
M	7	8.00							8.00							
T	8	8.00							8.00							
W	9	8.00							8.00							
TH	10	8.00							8.00	Cost objective/funding source #4 Admin DACA18A						60%
F	11	4.00	36.00		4.00				8.00							
S	12								0.00							
S	13								0.00	Cost objective/funding source #5						
M	14	3.00				5.00			8.00	Enter a valid account code above						
T	15	8.00							8.00							
W	16	8.00							8.00							
TH	17	8.00							8.00							
F	18	8.00	35.00						8.00							
S	19								0.00							
S	20								0.00							
M	21	8.00							8.00							
T	22	8.00							8.00							
W	23	8.00							8.00							
TH	24	8.00							8.00							
F	25	8.00	40.00						8.00							
S	26								0.00							
S	27								0.00							
M	28	8.00							8.00							
T	29	0.00				8.00			8.00							
W	30	8.00							8.00							
TH	31	8.00							8.00							
F	1		24.00						0.00							
S	2								0.00							
S	3								0.00							
		153.00	0.00	3.00	16.00	0.00	0.00	0.00								

Total number of hours worked and leave taken = 184.00

- Proof of payment for salary requires payroll register and the relevant time and effort report.
- For employees paid with federal funds, the report must show that the employee worked on that specific federal program cost objective and reflect the total activity for which the employee is compensated
- Because practices vary as to the activity constituting a full workload, records may reflect categories of activity expressed as a percentage distribution of total activities.
- Time and effort template may be found in the finance section of the CSI resource website <https://resources.csi.state.co.us/financial-services-library/>

The Time & Effort must be signed by employee and supervisor

I certify that the time reported above is a complete and accurate after-the-fact representation of my time and effort worked on each cost objective/funding source for the month. I understand that cost objectives/funding sources are not interchangeable and that misrepresenting this information could result in corrective action or termination.

Employee Signature & Date

Supervisor Signature & Date

DUE DATE: This form must be turned into your Human Resources Manager by the 5th (or falling business day) of every month.

Leave Tracking Key: HOL = Holiday, VAC = Vacation or Annual, SICKS = Sick Self, SICKF = Sick Family, PERS = Personal leave for all employees only, OTHER = Other leave includes administrative, bereavement, and jury duty. If you record leave time under OTHER, please add a description of leave.



Uniform Grant Guidance

Time and Effort Form Continued

- ▶ Time and Effort Form requires backup documentation
- ▶ One of the most common findings in audits is lack of supporting documentation for time and effort
- ▶ Estimate and true-up quarterly allowable

Employee Activity Tracking-April 2019									
Robidart, Marcie									
Employee Name					Employee ID Number				
Grant Activity Tracking									
Day	Date	CSI Admin DACA18A	IDEA DACA4027	Title IA DACA4010	Title IIA DACA 4367	Title IIIA DACA 4365	Perkins DACA 4048	NLA DACA6282	Total
M	1	3.00		1.00	0.50	0.50		3.00	8.00
T	2	3.00		1.00			1.00	3.00	8.00
W	3	1.00		2.00			2.00	3.00	8.00
TH	4	4.00						4.00	8.00
F	5			8.00					8.00
S	6								
S	7								
M	8	3.00						3.00	3.00
T	9	5.00						3.00	8.00
W	10	4.00		2.00			1.00	1.00	8.00
TH	11							8.00	8.00
F	12	2.50	1.00	0.50			2.50	1.50	8.00
S	13								
S	14								
M	15								4.00
T	16								0.00
W	17								0.00
TH	18								0.00
F	19								0.00
S	20								
S	21								
M	22								0.00
T	23								0.00
W	24								0.00
TH	25								0.00
F	26								0.00
S	27								
S	28								
M	29								0.00
T	30								0.00
Totals		25.50	1.00	14.50	0.50	0.50	10.50	26.50	79.00



Uniform Grant Guidance

Proof of Payment

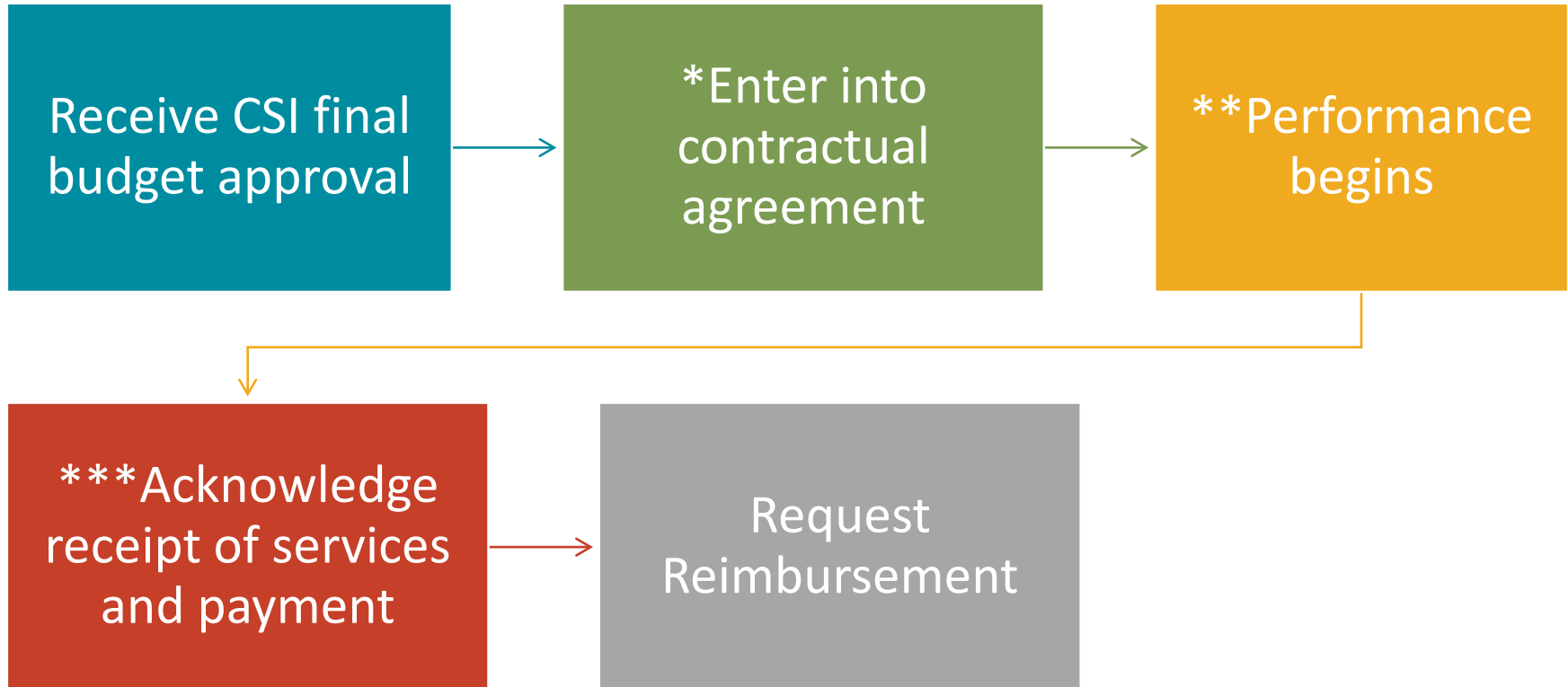
- ▷ **Payment by check**
 - Copy of cleared check
- ▷ **Payment by debit card**
 - Copy of bank statement showing cleared transactions
- ▷ **Payment by credit**
 - Copy of the credit card statement showing charge AND copy of bank statement showing payment balance paid in full

*No reimbursement for tax with Federal Funding



Uniform Grant Guidance

Contracted Services



1 - Do NOT encumber funds prior to budget approval

2 - Performance period does not begin until after the contract is fully signed after signature date

3 - Acknowledge of service is required and must be signed by contractor and school staff that can attest to services <https://resources.csi.state.co.us/financial-services-library/>



Q&A

Direct technical questions to: MarcieRobidart@csi.state.co.us
(303) 866-6841

Submit Vouchers to: RFF@csi.state.co.us