

**DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
DIVISION OF FEDERAL FINANCIAL ASSISTANCE**

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CDBG-DR Management Memo #22-01

Date: February 14, 2022

To: Community Development Block Grant – Disaster Recovery (CDBG-DR) and Mitigation (MIT) Subrecipients

Subject: Grants Network Financial Reports

Attachments: Subrecipient Supporting Documents Reference Guide, CDBG-DR/MIT Financial Report Workbook

NOTE #1: This management memo contains information that will be integrated into the completed CDBG-DR/MIT Grant Administration Manual at a future date. At the point that this memo becomes outdated, it will be rescinded and superseded by the Grant Administration Manual.

Purpose

The purpose of this memo is to document the process and requirements for Grants Network Financial Reports for all CDBG-DR/MIT programs. This includes gathering and reviewing required supporting documentation, filling out the Financial Report Workbook, and completing required Grants Network actions.

Documentation is a key part of complete reporting. The California Department of Housing and Community Development (Department) requires subrecipients to maintain supporting documentation for all data entered and submitted on Grants Network Financial Reports, including activity delivery expenditures, activity expenditures, administration expenditures (if allowable) and all expenditures of CDBG-DR/MIT Program Income. Subrecipients shall maintain in their records copies of all Financial Reports and full supporting documentation to substantiate each Financial Report. However, only certain information and documents must be submitted to the Department in Grants Network.

Background Requirements

The U.S. Department of Housing and Urban Development's (HUD) recordkeeping requirements for CDBG-DR/MIT funds administered by the Department are contained in 24 CFR Part 570. Specifically, 24 CFR 570.490 (a) (1) states that "The State shall establish and maintain such records as may be necessary to facilitate review and audit by HUD of the state's administration of CDBG funds under Section 570.493." The state is required to have fiscal controls such that it can ensure the funds are

used in “compliance with all applicable statutory and regulatory provisions,” “only spent for reasonable and necessary costs,” and “not used for general expenses required to carry out other responsibilities of state and local governments” as described in Section 570.489 (d).

The new Excel-based Financial Report Workbook must be used beginning in March 2022 for all CDBG-DR/MIT Subrecipients to submit Grants Network Financial Reports, monthly, beginning with February 2022 expenditures. This workbook will also serve as documentation that the authorized representative of the Subrecipient has approved the Financial Report Workbook.

Frequency

Grants Network Financial Reports must be submitted on a monthly basis. The only acceptable reason for not requesting reimbursement on your monthly Grants Network Financial Report is if your incurred costs do not exceed \$1,000.00, pursuant to Standard Agreement Exhibit B – Method of Payment.

Grants Network Financial Reports are due on the 10th of each month for the previous month’s expenses (reporting period). For example, the Grants Network Financial Report will be due on March 10th for expenses incurred during the month of February.

HCD Program Representatives may grant an extension of the Grants Network Financial Report due date **up to 25 days from the end of the reporting period**. To request an extension, please email the request to your HCD Program Representative. The HCD Program Representative will extend the due date manually in Grants Network.

Process

The CDBG-DR/MIT Grants Network Financial Report process is comprised of three distinct activities:

- Step 1: Gathering and reviewing required supporting documentation
- Step 2: Completing the Financial Report Workbook
- Step 3: Completing and submitting information in the Grants Network Financial Report

Step 1: Required Documentation

Subrecipients are required to submit supporting documentation for all expenditures claimed in the Financial Reporting Workbook. Timely review of supporting documentation allows the Department to determine that the Subrecipient is meeting all program requirements and will prevent situations in which a Subrecipient may be required to re-pay the Department for funds spent on ineligible costs (as determined at 2 CFR 200.339(b) and per each CDBG-DR/MIT program’s policies). While proof of payment is not required with each expenditure claimed in the Financial Report Workbook, Subrecipients must maintain that documentation in their records and must be prepared to furnish it to the Department upon request for monitoring purposes. The Department reserves the right to request additional documentation to support any expenditures claimed in the Financial Reporting Workbook.

Acceptable documentation types are included in the attached Supporting Documents Reference Guide, including the required Procurement Certification form. Additional acceptable documentation may be provided in each respective CDBG-DR/MIT program's policies and procedures manual.

Step 2: Completing the Financial Report Workbook

Subrecipients will receive a Financial Report Workbook from their HCD Program Representative. The Financial Report Workbook is an Excel template composed of five worksheets: a coversheet, an expenditures worksheet that is linked to the coversheet, an employee timesheet template, and a payroll report form. Images of these sheets are shown on the following pages as Exhibit 1.

The coversheet, linked expenditures worksheet, and payroll report form must be completed and submitted with each monthly Grants Network Financial Report.

The employee timesheet template form must only be completed if the Subrecipient's local timesheet system/process cannot produce a timesheet for each employee that worked on a CDBG-DR/MIT project or activity that (1) specifies the date range of the pay period, (2) reflects all hours worked during the pay period, (3) identifies the number of hours and percentage of total hours worked for each project / activity by funding source, and (4) can be signed and dated by the employee and supervisor or otherwise authorized electronically. Submissions must submit either the Subrecipient's local timesheet that conforms with the employee timesheet template, or the employee timesheet template for each employee charged during the reporting period.

If you need additional employee timesheets for more than one employee, you may right-click the employee timesheet tab, select move or copy, check "Create a copy" and click "OK" to create additional employee timesheets within the workbook.

Exhibit 1 – Financial Report Workbook Coversheet

Community Development Block Grant - Disaster Recovery and Mitigation Financial Reporting Form

Subrecipient: <input style="width: 90%;" type="text"/> Project Name: <input style="width: 90%;" type="text"/> Subrecipient Address: <input style="width: 90%;" type="text"/> Subrecipient TIN: <input style="width: 90%;" type="text"/> Subrecipient Invoice #: <input style="width: 90%;" type="text"/>	HCD Contract #: <input style="width: 90%;" type="text"/> Amendment #: <input style="width: 90%;" type="text"/> Agreement Start Date: <input style="width: 90%;" type="text"/> Agreement End Date: <input style="width: 90%;" type="text"/> Reporting Period Start Date: <input style="width: 90%;" type="text"/> Reporting Period End Date: <input style="width: 90%;" type="text"/> Reporting end before Agreement end? No
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Financial Activity Report

Category	Amount Reported This Period
Activity	\$ -
General Administration	\$ -
Activity Delivery	\$ -
Total	\$ -
Is Program Income allocated to this project?	<input type="radio"/> YES <input checked="" type="radio"/> NO

Requests must:

- (a) be submitted in Grants Network;
- (b) be supported by documentation that fully substantiates costs;
- (c) include the service period of costs; and
- (d) be submitted monthly, even if zero expenditures are reported.

I **certify** that all costs contained in this report: are compliant with the Uniform Administrative Requirements at 2 CFR 200, and all other applicable federal, state and local requirements; and are necessary, reasonable, allowable, do not exceed budgets by type of cost in the Master/Standard Agreement, and have not already been reimbursed by CDBG-DR/MIT funds or another funding source. I certify that the information in this report and attachments accurately reflects the work performed in accordance with the associated Master/Standard Agreement, that costs have been incurred and/or paid, and that costs included are consistent with the Master/Standard Agreement and all associated Exhibits. I certify that all contractors or vendors that invoiced for costs contained in this report and that are subject to the Procurement Standards at 2 CFR 200 Subpart D were procured in accordance with this subpart, and all other applicable federal, state and local requirements. By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Master/Standard Agreement. 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. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

Name/Title of Authorized Certifying Official:	Phone Number:
Authorized Certifying Official Signature:	Date:
X <small>Authorized Certifying Official Signature Certifying Official Title</small>	

Instructions for Completing this Coversheet

Please use this coversheet for all Financial Activity Reports and ensure that you have followed these instructions:

- 1.) On this Coversheet Tab, (a) verify all subrecipient information at the top is accurate, and (b) enter the associated Reporting Period.
- 2.) Enter the expenditure details on the Expenditures tab. This will automatically populate your total expenditures on this Coversheet.
- 3.) Clearly print the name and title of the authorized signatory signing this report.
- 4.) Verify all information is correct, then print and sign this Coversheet.
- 5.) Submit the Financial Activity Report in Grants Network entering totals from the 'Amount Requested this Period' column provided on this Coversheet; and upload
 - (a) signed PDF copy of this Coversheet,
 - (b) this entire workbook, and
 - (c) the supporting documentation as listed on the Expenditures tab.

Expenditures Worksheet

Community Development Block Grant - Disaster Recovery and Mitigation Financial Reporting Form

Instructions for Completing this Expenditures Sheet

Please use this sheet to provide detail for all expenditures during the Reporting Period and ensure that you have followed these instructions.

- 1.) Use the drop-down to select the **Category** (i.e. Activity, General Admin, Activity Delivery, Other);
- 2.) Enter the Service Period in which the expenditure occurred, this could be a specific date or range;
- 3.) Enter an Expenditure Name for this item that identifies the Service/Expenditure type;
- 4.) Provide a brief Service Description that directly relates to the approved (Master) Standard Agreement;
- 5.) Enter the Amount for that line item reported by this request;
 - ** Ensure that documents are listed in the order in which they are provided in any attachments in Grants Network.
 - ** If necessary, provide additional details in the Service Description to make clear what costs are being reported, which costs are allocated or prorated, the basis for such allocation or proration, and any additional guidance important for HCD's review.

Total \$ -

Description of Claims for Reimbursement:

	Category	Service Period	Expenditure Name	Service Description	Amount
1					\$ -
2					\$ -
3					\$ -
4					\$ -
5					\$ -
6					\$ -
7					\$ -
8					\$ -
9					\$ -
10					\$ -
11					\$ -
12					\$ -
13					\$ -
14					\$ -
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27					\$ -
28					\$ -
29					\$ -
30					\$ -
31					\$ -
32					\$ -
33					\$ -
34					\$ -
35					\$ -
36					\$ -
37					\$ -
38					\$ -
39					\$ -
40					\$ -

The fields at the top of the coversheet, circled in red in Exhibit 2 below, will be prepopulated by the HCD Program Representative. Subrecipients should verify that all information is accurate. Subrecipients should fill in the Subrecipient Invoice #, if applicable, and the Reporting Period Start Date and Reporting Period End Date for each report submitted.

Exhibit 2 – Coversheet Worksheet

Community Development Block Grant - Disaster Recovery and Mitigation			
Financial Reporting Form			
Subrecipient:	County of Example	HCD Contract #:	20-DRMHP-12345
Project Name:	County of Example MSA	Amendment #:	
Subrecipient Address:	123 Main Street	Agreement Start Date:	7/1/2021
	Example, CA 12345	Agreement End Date:	8/31/2025
Subrecipient TIN:	12-3456789	Reporting Period Start Date:	
Subrecipient Invoice #:		Reporting Period End Date:	
Reporting end before Agreement end?			No

Subrecipients should **NOT** enter additional information on the coversheet, aside from entering Authorized Official information, which is covered later in this memo. All financial information contained on the coversheet is automatically generated as Subrecipients complete the expenditures worksheet.

The expenditures worksheet is where Subrecipients should enter their program expenses. Note that Subrecipients are required to provide supporting documentation for ALL claimed expenses in the Grants Network Financial Report, as described above. As shown below in Exhibit 5, Subrecipients should list their expenses in the **same order** that the supporting documentation is provided in the Grants Network Financial Report.

Subrecipient must ensure that the information contained on the expenditures worksheet matches the supporting documentation provided. Subrecipients should double check values and dates of service.

Documentation of personnel costs consists of three key items:

- Employee timesheet (submit with Financial Report) as shown in Exhibit 3;
- Payroll register (retain in local records); and
- Payroll report (complete form within the Financial Reporting workbook) as shown in Exhibit 4.

Exhibit 3 – Sample Employee Timesheet

Employee Timesheets must be submitted for each employee that worked on a CDBG-DR/MIT project or activity. The timesheet must:

- Specify the period (date range) of the pay period, and must correspond with the employee’s paycheck for that pay period;
- Reflect all hours worked during the pay period, regardless of funding source;
- Identify the number of hours and percentage of total hours worked for each project / activity by funding source;
- Be signed and dated by the employee and supervisor or otherwise authorized electronically.

The employee timesheet form included within the Financial Report Workbook includes all of this information and is provided for your use. If you have a local timesheet that meets all of these requirements, feel free to use that and upload it with your Financial Report instead.

To use the employee timesheet form included within the Financial Report Workbook:

1. Enter the employee name
2. Enter the week ending date to populate the Day and Date columns (Note: If your pay period includes fewer days than the number provided on this form, only fill in the days/dates where hours were worked; if your pay period is monthly, you may use a second timesheet or supply a local conforming timesheet)
3. Adjust the funding source and activity descriptions across the top row to fit the employee’s workload (activities they are working on)
4. Fill in the daily hours worked by grant/activity
5. Insert any comments, if applicable
6. The employee must sign and date the form
7. The employee’s supervisor must sign and date the form

EMPLOYEE TIMESHEET														
Employee: <u>Jane Doe</u> 1														
Week ending: <u>01/15/22</u> 2														
Day	Date	DR-MHP activity 1	DR-MHP activity 2	MIT activity 1	INF activity 1	INF activity 2	PPS activity 1	PPS activity 2	Other local 1	Other local 2	Other local 3	Other local 4	Total	Comments
Friday	12/31/21	2.00	2.00	1.00	1.00	1.00	1.00						8.00	
Saturday	01/01/22													
Sunday	01/02/22													
Monday	01/03/22	1.00	1.00	1.00	1.00	1.00			3.00				8.00	5
Tuesday	01/04/22	1.00	1.00	1.00	1.00	1.00			3.00				8.00	
Wednesday	01/05/22	1.00	1.00	1.00	1.00	1.00			3.00				8.00	
Thursday	01/06/22	1.00	1.00	1.00	1.00	1.00			3.00				8.00	
Friday	01/07/22	1.00	1.00	1.00	1.00	1.00			3.00				8.00	
Saturday	01/08/22													
Sunday	01/09/22													
Monday	01/10/22	8.00											8.00	
Tuesday	01/11/22	8.00											8.00	
Wednesday	01/12/22	8.00											8.00	
Thursday	01/13/22		8.00										8.00	
Friday	01/14/22			1.00	1.00	1.00	1.00	1.00	1.00	1.00		1.00	8.00	
Saturday	01/15/22													
Total hours:		31.00	15.00	7.00	7.00	7.00	2.00	1.00	16.00	1.00		1.00	88.00	
Pay period pro-rated %:		35.23%	17.05%	7.95%	7.95%	7.95%	2.27%	1.14%	18.18%	1.14%		1.14%	100.00%	
<div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 45%;"> <p>6 Employee signature: _____</p> <p>Date: _____</p> </div> <div style="width: 45%;"> <p>7 Supervisor signature: _____</p> <p>Date: _____</p> </div> </div>														

Exhibit 4 – Payroll Report Form

The Payroll Report Form brings together source information from employee timesheets and your payroll system’s payroll registers. The timesheets tell you how much of an employee’s total cost is allocable to the CDBG-DR/MIT activity or project. The payroll register tells you the total cost of the employee for a given pay period.

To fill out the required payroll report form in the Financial Report Workbook:

1. Fill in the reporting period
2. Fill in the employee name and position title (each row represents one employee for one pay period)
3. If the employee is hourly, enter their total hours
4. If the employee is salaried, enter the numeral “1”
5. Enter the hourly rate of pay or the total salary for the period
6. Enter the total cost to the employer of any other fringe benefits or costs (FICA, taxes, insurance, PERS, etc.)
7. Enter the pro-rated pay period percentage for the CDBG-DR/MIT activity from the timesheet

PAYROLL REPORT									
Instructions: Each entry on this report should represent one employee for one pay period. The total wages, total wages and benefits, and personnel reimbursement total will auto-populate.									
HCD Contract #: DR-MHP activity 1									
1	Reporting period: 1/1/22 - 1/31/22								
Employee name	Position / title	Total hours (or if salaried, enter 1)	Hourly rate (or total salary)	Total wages (only)	Other benefits / costs	Total Wages and Benefits	Pro-rated pay period percentage	Personnel reimbursement total	
2	Jane Doe (1/1-1/15)	3	88	\$ 30.00	\$ 2,640.00	\$ 290.00	\$ 2,930.00	35.23%	\$ 1,032.24
	John Doe (1/1-1/15)	4	1	\$ 4,000.00	\$ 4,000.00	\$ 478.14	\$ 4,478.14	57.34%	\$ 2,567.77
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Exhibit 5 – Sample Expenditures on the Expenditures Worksheet

Community Development Block Grant - Disaster Recovery and Mitigation Financial Reporting Form

Instructions for Completing this Expenditures Sheet

Please use this sheet to provide detail for all expenditures during the Reporting Period and ensure that you have followed these instructions.

- 1.) Use the drop-down to select the **Category** (i.e. Activity, General Admin, Activity Delivery, Other);
- 2.) Enter the Service Period in which the expenditure occurred, this could be a specific date or range;
- 3.) Enter an Expenditure Name for this item that identifies the Service/Expenditure type;
- 4.) Provide a brief Service Description that directly relates to the approved (Master) Standard Agreement;
- 5.) Enter the Amount for that line item reported by this request;
 - ** Ensure that documents are listed in the order in which they are provided in any attachments in Grants Network.
 - ** If necessary, provide additional details in the Service Description to make clear what costs are being reported, which costs are allocated or prorated, the basis for such allocation or proration, and any additional guidance important for HCD's review.

Total \$ 13,950.00

Description of Claims for Reimbursement:

	Category	Service Period	Expenditure Name	Service Description	Amount
1	Activity	1/1/22-1/31/22	Consultant Invoices	(1) Invoice for January 2022	\$ 10,000.00
2	Activity Delivery	1/1/22-1/31/22	Staff Timesheets	January 2022 timesheet for Jane Doe	\$ 3,600.00
3	Activity Delivery	1/1/22-1/31/22	Newspaper Invoice	Invoice for publishing RROF	\$ 350.00
4					\$ -
5					\$ -
6					\$ -

Completing the expenditures worksheet automatically populates the expenditures categories and amounts on the coversheet as shown in Exhibit 6, below. Subrecipients should confirm that these are the totals they are expecting to claim for the reporting period. **Any adjustments to categories or amount MUST be made on the expenditures worksheet.**

Note that Subrecipients should break out Activity and Activity Delivery expenditures on the Financial Report Workbook.

Once totals are correct, the Subrecipient should click Yes or No as shown in Exhibit 6 to indicate whether Program Income has been allocated for this project.

To finish the form, the Subrecipient needs to fill in the Name, Title, and Phone Number of the Authorized Certifying Official **indicated on the Resolution** and have that official electronically sign and date the form, as indicated below.

Exhibit 6 – Coversheet with Automatically Populated Entries

Community Development Block Grant - Disaster Recovery and Mitigation Financial Reporting Form

Subrecipient: County of Example	HCD Contract #: 20-DRMHP-12345
Project Name: County of Example MSA	Amendment #:
Subrecipient Address: 123 Main Street	Agreement Start Date: 7/1/2021
Example, CA 12345	Agreement End Date: 8/31/2025
Subrecipient TIN: 12-3456789	Reporting Period Start Date:
Subrecipient Invoice #:	Reporting Period End Date:
Reporting end before Agreement end? No	

Financial Activity Report

Category	Amount Reported This Period
Activity	\$ 10,000.00
General Administration	\$ -
Activity Delivery	\$ 3,950.00
Total	\$ 13,950.00
Is Program Income allocated to this project? <input type="radio"/> YES <input checked="" type="radio"/> NO	

Requests must:

- (a) be submitted in Grants Network;
- (b) be supported by documentation that fully substantiates costs;
- (c) include the service period of costs; and
- (d) be submitted monthly, even if zero expenditures are reported.

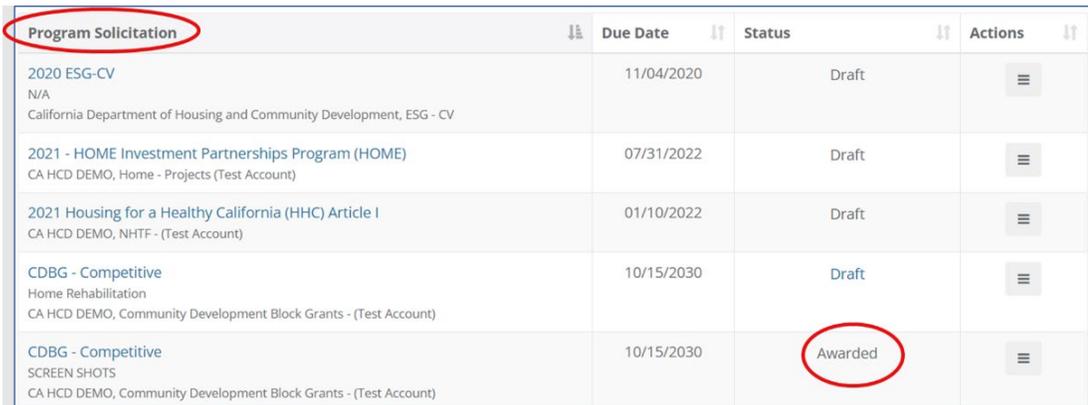
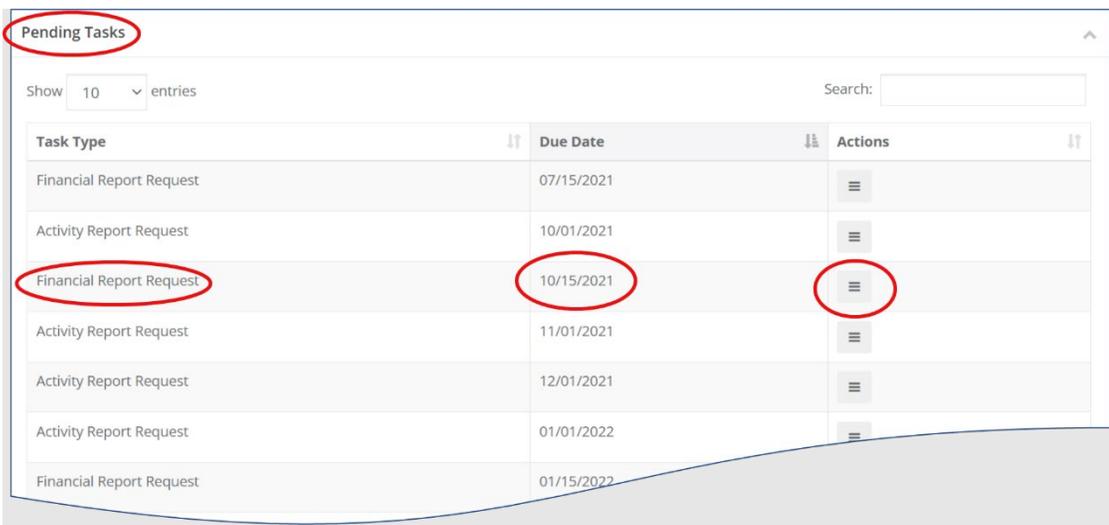
I **certify** that all costs contained in this report: are compliant with the Uniform Administrative Requirements at 2 CFR 200, and all other applicable federal, state and local requirements; and are necessary, reasonable, allowable, do not exceed budgets by type of cost in the Master/Standard Agreement, and have not already been reimbursed by CDBG-DR/MIT funds or another funding source. I certify that the information in this report and attachments accurately reflects the work performed in accordance with the associated Master/Standard Agreement, that costs have been incurred and/or paid, and that costs included are consistent with the Master/Standard Agreement and all associated Exhibits. I certify that all contractors or vendors that invoiced for costs contained in this report and that are subject to the Procurement Standards at 2 CFR 200 Subpart D were procured in accordance with this subpart, and all other applicable federal, state and local requirements. By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Master/Standard Agreement. 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. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

Name/Title of Authorized Certifying Official:	Phone Number:
Authorized Certifying Official Signature:	Date:
<div style="border: 1px solid black; padding: 2px; width: 100%;"> X Authorized Certifying Official Signature Certifying Official Title </div>	

Step 3: Submitting the Grants Network Financial Report

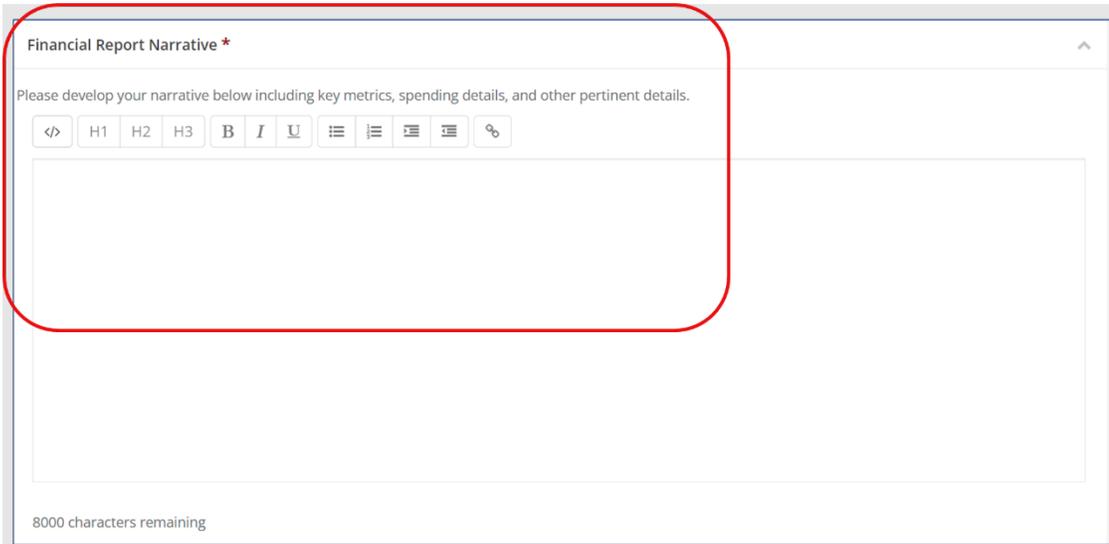
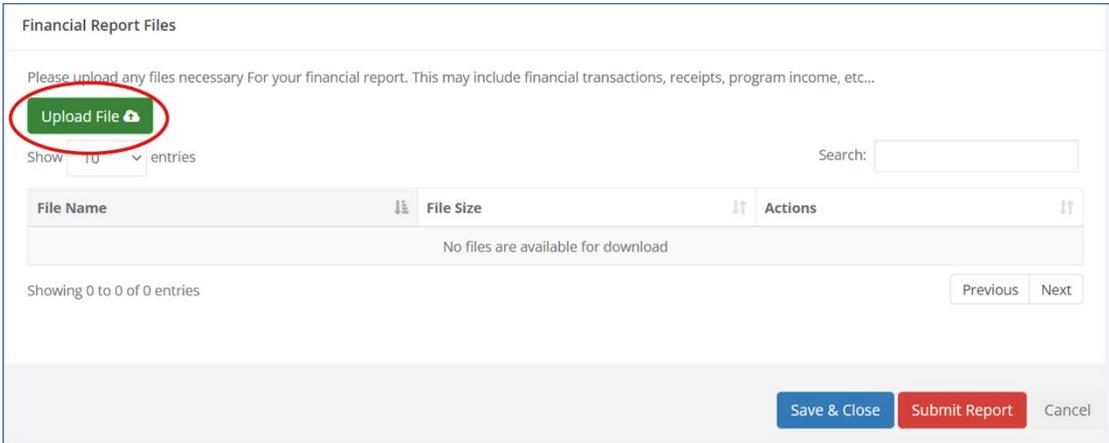
Subrecipients should complete the Grants Network Financial Report by completing the steps shown in Exhibit 5, below.

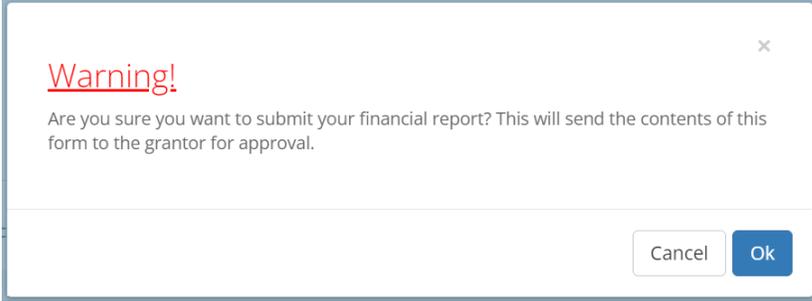
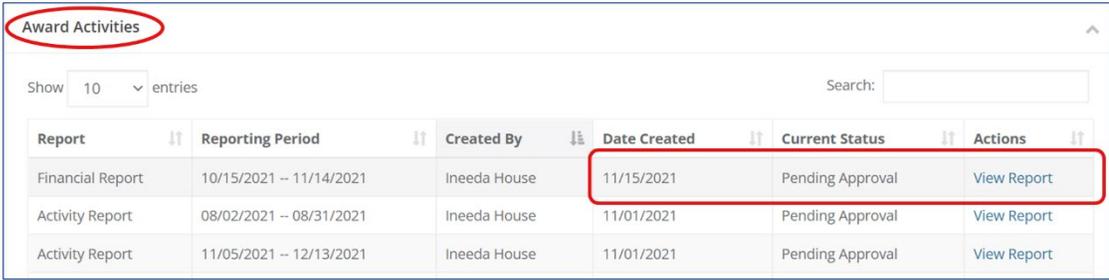
Exhibit 5 – Grants Network Financial Report Steps

Step	Action																								
1	Log in to the portal with your credentials.																								
2	<p>Scroll to Program Solicitation and click the link for the award that needs a Financial Report.</p> <ul style="list-style-type: none"> Make sure to select the option that shows Awarded in the status column.  <table border="1"> <thead> <tr> <th>Program Solicitation</th> <th>Due Date</th> <th>Status</th> <th>Actions</th> </tr> </thead> <tbody> <tr> <td>2020 ESG-CV N/A California Department of Housing and Community Development, ESG - CV</td> <td>11/04/2020</td> <td>Draft</td> <td>⋮</td> </tr> <tr> <td>2021 - HOME Investment Partnerships Program (HOME) CA HCD DEMO, Home - Projects (Test Account)</td> <td>07/31/2022</td> <td>Draft</td> <td>⋮</td> </tr> <tr> <td>2021 Housing for a Healthy California (HHC) Article I CA HCD DEMO, NHTF - (Test Account)</td> <td>01/10/2022</td> <td>Draft</td> <td>⋮</td> </tr> <tr> <td>CDBG - Competitive Home Rehabilitation CA HCD DEMO, Community Development Block Grants - (Test Account)</td> <td>10/15/2030</td> <td>Draft</td> <td>⋮</td> </tr> <tr> <td>CDBG - Competitive SCREEN SHOTS CA HCD DEMO, Community Development Block Grants - (Test Account)</td> <td>10/15/2030</td> <td>Awarded</td> <td>⋮</td> </tr> </tbody> </table>	Program Solicitation	Due Date	Status	Actions	2020 ESG-CV N/A California Department of Housing and Community Development, ESG - CV	11/04/2020	Draft	⋮	2021 - HOME Investment Partnerships Program (HOME) CA HCD DEMO, Home - Projects (Test Account)	07/31/2022	Draft	⋮	2021 Housing for a Healthy California (HHC) Article I CA HCD DEMO, NHTF - (Test Account)	01/10/2022	Draft	⋮	CDBG - Competitive Home Rehabilitation CA HCD DEMO, Community Development Block Grants - (Test Account)	10/15/2030	Draft	⋮	CDBG - Competitive SCREEN SHOTS CA HCD DEMO, Community Development Block Grants - (Test Account)	10/15/2030	Awarded	⋮
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3	<p>Scroll to Pending Tasks and look for the report you would like to complete.</p>  <table border="1"> <thead> <tr> <th>Task Type</th> <th>Due Date</th> <th>Actions</th> </tr> </thead> <tbody> <tr> <td>Financial Report Request</td> <td>07/15/2021</td> <td>⋮</td> </tr> <tr> <td>Activity Report Request</td> <td>10/01/2021</td> <td>⋮</td> </tr> <tr> <td>Financial Report Request</td> <td>10/15/2021</td> <td>⋮</td> </tr> <tr> <td>Activity Report Request</td> <td>11/01/2021</td> <td>⋮</td> </tr> <tr> <td>Activity Report Request</td> <td>12/01/2021</td> <td>⋮</td> </tr> <tr> <td>Activity Report Request</td> <td>01/01/2022</td> <td>⋮</td> </tr> <tr> <td>Financial Report Request</td> <td>01/15/2022</td> <td>⋮</td> </tr> </tbody> </table>	Task Type	Due Date	Actions	Financial Report Request	07/15/2021	⋮	Activity Report Request	10/01/2021	⋮	Financial Report Request	10/15/2021	⋮	Activity Report Request	11/01/2021	⋮	Activity Report Request	12/01/2021	⋮	Activity Report Request	01/01/2022	⋮	Financial Report Request	01/15/2022	⋮
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Step	Action																																																																																																																
4	<p>Click on the corresponding three lines  under Actions and select Create Financial Report in the pop-up window.</p> <div data-bbox="662 296 1065 468" style="border: 1px solid #ccc; padding: 10px; text-align: center;"> <p>Create Financial Report</p> <p>Mark Task Complete</p> </div>																																																																																																																
5	<p>Under Financial Report Details, find the Reporting Period field. Click in the field and use the calendar to select the reporting period. The reporting period selected must match the reporting period inputted in the Financial Report Workbook coversheet. Click Apply.</p> <div data-bbox="415 688 1312 1283" style="border: 1px solid #ccc; padding: 10px;"> <p>Financial Report Details</p> <p>Reporting Period: *</p> <div style="border: 2px solid red; padding: 2px; display: inline-block; margin-bottom: 5px;"> <input type="text"/> </div> <div style="display: flex; justify-content: space-between; align-items: center; margin-top: 5px;"> <div style="border: 1px solid #ccc; padding: 2px;"> <input type="text" value="11/15/2021"/> </div> <div style="border: 1px solid #ccc; padding: 2px;"> <input type="text" value="11/15/2021"/> </div> <div style="margin-left: 10px;"> <input type="button" value="Apply"/> <input type="button" value="Cancel"/> </div> </div> <table border="1" style="width: 100%; text-align: center; font-size: small;"> <thead> <tr> <th colspan="7">Nov 2021</th> <th colspan="7">Dec 2021</th> </tr> <tr> <th>Su</th><th>Mo</th><th>Tu</th><th>We</th><th>Th</th><th>Fr</th><th>Sa</th> <th>Su</th><th>Mo</th><th>Tu</th><th>We</th><th>Th</th><th>Fr</th><th>Sa</th> </tr> </thead> <tbody> <tr> <td>31</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td> <td>28</td><td>29</td><td>30</td><td>1</td><td>2</td><td>3</td><td>4</td> </tr> <tr> <td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td> <td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td> </tr> <tr> <td>14</td><td style="background-color: #0070c0; color: white;">15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td> <td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td> </tr> <tr> <td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td> <td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td> </tr> <tr> <td>28</td><td>29</td><td>30</td><td>1</td><td>2</td><td>3</td><td>4</td> <td>26</td><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td><td>1</td> </tr> <tr> <td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td> <td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td> </tr> </tbody> </table> </div>	Nov 2021							Dec 2021							Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	31	1	2	3	4	5	6	28	29	30	1	2	3	4	7	8	9	10	11	12	13	5	6	7	8	9	10	11	14	15	16	17	18	19	20	12	13	14	15	16	17	18	21	22	23	24	25	26	27	19	20	21	22	23	24	25	28	29	30	1	2	3	4	26	27	28	29	30	31	1	5	6	7	8	9	10	11	2	3	4	5	6	7	8
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6	<p>Enter claim totals for Activity, Activity Delivery and/or Program Income as applicable, based on the approved budget. These entries must match the amounts inputted on the Financial Report Workbook expenditures worksheet.</p>																																																																																																																

Step	Action																																			
	<div data-bbox="310 163 1414 772"> <p>Financial Report Details</p> <p>Reporting Period: 05/01/2021 - 07/31/2021</p> <p>Invoice number: <input type="text"/> Receiver ID: <input type="text"/></p> <table border="1"> <thead> <tr> <th>Category</th> <th>Spend</th> <th>Match</th> <th>Spend + Match</th> <th>Award Remaining</th> </tr> </thead> <tbody> <tr> <td>1. Activity</td> <td>\$ 25,872.34</td> <td>\$ 0.00</td> <td>\$ 25,872.34</td> <td>\$ 96,225.66</td> </tr> <tr> <td>2. General Administration</td> <td>\$ 4,897.00</td> <td>\$ 0.00</td> <td>\$ 4,897.00</td> <td>\$ 20,111.00</td> </tr> <tr> <td>3. Activity Delivery</td> <td>\$ 0.00</td> <td>\$ 0.00</td> <td>\$ 0.00</td> <td>\$ 0.00</td> </tr> <tr> <td>Program Income</td> <td>Received \$ 13,444.00</td> <td>Expended \$ 127,573.65</td> <td></td> <td>Balance \$ <input type="text"/></td> </tr> <tr> <td>Report Total</td> <td>Spend \$ 30,769.34</td> <td>Match \$ 0.00</td> <td>Spend + Match \$ 30,769.34</td> <td></td> </tr> <tr> <td></td> <td>100.00 %</td> <td>0.00 %</td> <td></td> <td></td> </tr> </tbody> </table> </div>	Category	Spend	Match	Spend + Match	Award Remaining	1. Activity	\$ 25,872.34	\$ 0.00	\$ 25,872.34	\$ 96,225.66	2. General Administration	\$ 4,897.00	\$ 0.00	\$ 4,897.00	\$ 20,111.00	3. Activity Delivery	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	Program Income	Received \$ 13,444.00	Expended \$ 127,573.65		Balance \$ <input type="text"/>	Report Total	Spend \$ 30,769.34	Match \$ 0.00	Spend + Match \$ 30,769.34			100.00 %	0.00 %		
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<p data-bbox="228 1060 256 1096">7</p>	<p data-bbox="310 814 1403 932">Check the Reimbursement Request box at the bottom of the Financial Report Details section if you are requesting reimbursement. The dollar value will auto-populate based on the expenditures entered.</p> <div data-bbox="683 953 1045 1087"> <input checked="" type="checkbox"/> Reimbursement Request* <input type="text" value="\$ 6,700.00"/> </div> <ul style="list-style-type: none"> <li data-bbox="358 1115 1393 1232">■ If this is a zero-dollar Financial Report without a reimbursement request, make sure that you DO NOT CHECK the Reimbursement Request box. <div data-bbox="675 1255 1052 1339"> <input type="checkbox"/> Reimbursement Request </div>																																			
<p data-bbox="228 1472 256 1507">8</p>	<p data-bbox="310 1381 1409 1583">Include a Financial Narrative that provides a detailed summary of expenditures and associated work completed. If no reimbursement is requested, this should include detailed information about why no eligible costs have been incurred, and when they will be making their next reimbursement request.</p>																																			

Step	Action
	
9	<p>Below the Narrative field, Subrecipient will find the Financial Report Files section. Subrecipient should use the Upload file function to upload the completed Financial Report Workbook with the signed coversheet.</p> 
10	<p>Subrecipient should also use this feature to attach required supporting documentation detailed in Step 1 above, in the same order as the expenses listed in the expenditures worksheet.</p>
11	<p>When the report is ready to submit, Subrecipient clicks the red Submit Report button at the bottom of the page.</p>
12	<p>A warning box will pop up. The Subrecipient should click OK if they are ready to submit the report.</p> <ul style="list-style-type: none"> Clicking Cancel will take the Subrecipient back to the reporting screen.

Step	Action
	
13	After selecting OK , the Subrecipient will be taken to the Award Dashboard .
14	<p>Check status before exiting. Scroll to Award Activities and your submitted report status should say Pending Approval.</p> 
15	<p>If Subrecipient needs to save the report before it is ready to submit, they can click Save and Close to return to the report later.</p> <ul style="list-style-type: none"> ■ The Subrecipient can locate the unfinished report under Award Activities on the Award Dashboard. <p>The Current Status of the incomplete report should show as Draft, and Edit Report should appear in the Actions column.</p>

Effective Date

This memo is effective immediately as of March 1, 2022, and supersedes previous Management Memos and guidance related to Grants Network Financial Reports. This Management Memo applies to all active CDBG-DR/MIT grants, program income, new CDBG-DR/MIT grant awards that have not yet been put into a Standard Agreement, and future CDBG-DR/MIT grant awards.

Questions

If you have general process questions, please contact your HCD Program Representative.