State of Wisconsin Department of Natural Resources Community Financial Assistance

## **Grant Payment Worksheet**

Form 8700-002 (R 8/03) Page \_\_\_\_ of \_\_

Unit Name

Grant Number

Project Sponsor / Management

Notice:	Information reques	sted on this fo	orm is re	quired by t	the Department	when applying	for a reiml	bursement of	f eligible expenses.	The Department will not
consider	your payment requ	uest unless y	ou comp	lete and s	ubmit this form.					

Instructions: Itemize all project expenses, including donated labor, and attach photocopies of proof of expenses and payments for each item listed. See reverse for instructions. Use additional worksheets as necessary, numbering each. Submit with Grant Payment Request, Form 8700-001, or specific grant reimbursement form, to your DNR Grant Specialist.

Does this grant project include State Lab of Hygiene sample analysis costs?

Yes No

Date Expense Incurred	Invoice #	Proof of Payment #	Payee	Eligible Project Cos (Check Grant Ag	t Description greement)	Amount Paid	Amount Donated
Grant Begin Date Grant End Date					· · · · · · · · · · · · · · · · · · ·	Paid Subtotal	Donated Subtotal
			Total Project Costs: Please s (Sum of Paid Subtotal and Do	um all pages manually. nated Subtotal for all pages)	\$		

Form 8700-002 (R 8/03)

Use the worksheet to itemize all project expenses, including donated labor and donated expenses.

- Attach photocopies of proof of expenses and payments for each item listed.
- Use additional worksheets as necessary. Include Grant Number on each sheet.
- Submit Worksheet(s) and attachments with Grant Payment Request, Form 8700-001, or specific grant reimbursement form, to your DNR Grant Specialist.

## **Date Field and Column Definitions**

Date Expense Incurred: Date of invoice, purchase, or service rendered.

- Costs incurred prior to the beginning date or after the ending date of the grant agreement are not eligible for reimbursement, except as noted below.
- Exceptions: Certain land acquisition, design costs, and navigational aids may be available retroactively. Check with your DNR Grant Specialist.

**Invoice #:** Number on vendor invoice or bill associated with the purchase or service.

- Combined Costs: If an invoice combines costs for multiple grants or expenses, identify and explain specific costs associated with each grant expense. Attach a copy of this invoice, as well as proof of payment identified below. Use as many lines as necessary.
- Donated Expenses: Include invoice number if donated expenses are included on an invoice or bill. Otherwise, leave this field blank and go to "Proof of Payment" column.

Proof of Payment #: Number on check or money order used to pay the expense. If no proof of payment number, leave blank. Attachments required:

- Expenditure Proof of Payment Examples: Canceled check, with front side of check containing the amount of the check digitally printed by the bank under the signature line; Non canceled check with bank statement showing check cleared account; County payroll vouchers; Credit card statements. For acquisition expenditures, acquisition closing statements.
- Combined Proofs of Payment: If a proof of payment covers multiple expenses or grants, identify payments related to the particular grant expense on a copy.
- Donated Expenses: Volunteer Labor Log Sheet, or other donated labor/services documentation. Include volunteer names, type of work, hours worked, pay rate and totals. Log sheets require signatures of volunteer(s) and supervisor(s).

Payee: Name of consultant, contractor, vendor, supplier, etc. to whom payment was made.

Eligible Project Cost Description (Check Grant Agreement): Describe expense briefly. Include only eligible expenses as specified in the particular project grant application and grant agreement.

- Acquisition Grant Possible Eligible Expense Examples: Land/Conservation Easement, Recording Fees, Appraisal, Title Insurance, etc.
- Development Grant Possible Eligible Expense Examples: Construction, Equipment Rental, Landscape seed, Mulch, Demolition, etc.
- Other Grant Type Possible Eligible Expense Examples: Materials, Supplies, Maintenance-Grooming; Maintenance-Signage, Maintenance-Other, etc.

Amount Paid: The amount of the project cost expense paid out-of-pocket. Enter only actual expenditures in this column.

Amount Donated: The amount of value for donated services, labor, equipment, etc. Enter donated amounts in this column.

Grant Begin Date /Grant End Date: Dates specified on the first page of your grant agreement or grant amendment.

Paid Subtotal: The sum of all paid expenditures listed in this column, on this page.

Donated Subtotal: The sum of the value of each donated item listed in this column, on this page.

Total Project Cost: (Paid Subtotals all pages) + (Donated Subtotals all pages) = Total Project Costs

- Enter this total on page one of the Grant Payment Worksheet.
- Transfer amount to line 4, "Total Eligible Project Costs This Period" of Form 8700-001, Grant Payment Request.