Grant Payment Request Instructions

ELECTRONIC PAYMENT AUTHORIZATION

Effective March 1, 2010, all payments made under State Agency contracts and purchase orders must be made electronically through ePayment, New York State’s electronic payment program for vendors. Please make sure your organization has enrolled to receive ePayments before submitting your first payment request.

Additional information about ePayment, including how to enroll, is available on the NYS Office of the State Comptroller’s (OSC’s) Website at www.osc.state.ny.us/epay/index.htm, by e-mail at ePayments@osc.state.ny.us, or by telephone at (518) 474-4032.

EACH PAYMENT REQUEST MUST INCLUDE THE FOLLOWING FORMS:

A. Expenditure Report

You may fill in the attached Expenditure Report or create your own following the given format.

Each expenditure report should include, at a minimum:

1. **Contract #:** Enter the 7-digit version of your contract number (e.g., C12345G)
2. **Expenditure Report #:** Enter 1 for the first expenditure report submitted, 2 for the second, and so on.
3. **Page #:** If the more than 10 line items are needed, continue on another payment report form and enter the appropriate page number on each form.
4. **Category of Expense and Line Item from Contract Attachment B – Budget** (e.g., Salary – Program Manager, Contractual – Subcontract with Contractor Name, or Other Expenses – Supplies)
5. **Description of Work Task(s), and Associated Materials or Services:**
   description should be consistent with work plan tasks and/or activities reported in quarterly progress report (e.g., Outreach and training, Table and chairs for stewardship tasks and training events)
6. **Contractor/Vendor/Employee Name**
7. **Invoice/Timesheet/Bill # and Date:** provide dates services were rendered and/or goods received
   
   **ATTACH a copy of each invoice, timesheet, or bill showing goods/services were provided.**
8. **Check# and Date:** Enter the check number and the date of the payment (relating to appropriate invoice/billing)
   
   **ATTACH a copy of each check, receipt, or bank statement showing payment for billed goods/services.**
9. **Grant Amount:** Enter the amount of each expenditure to be reimbursed with grant funds. Only enter expenses that are eligible for reimbursement
10. **Match Amount:** Enter the amount of each expenditure that has been paid or provided by local (not state or federal) matching funds, volunteer labor, or in-kind contributions. Only enter expenses that are eligible for match.
11. **Total Eligible Amount:** Enter the total eligible amount of each expenditure, which must equal the total of the grant and match amounts listed.

12. **TOTAL (this page):** Enter the totals for the Grant Amount, Match Amount, and Total Eligible Amount columns. Only include the totals for the current page of the Expenditure Report. The Total Grant Amount should be entered in the Amount field of the State Aid Voucher. Match should not be included on the State Aid Voucher.

13. **Finance Officer Certification:** Certification that funds were expended in accordance with all requirements stipulated in the contract, including the printed name, title, and signature of the certifying finance officer along with the date. Each page of the Expenditure Report must include a signed certification.

14. **Completed Notary Statement:** Each page of the Expenditure Report must be signed and notarized separately.

**B. State of New York – State Aid Voucher**

Complete sections 1 through 8 and return with each payment request. Instructions can be found on the reverse side of the voucher.

1. Originating Agency is NYS Dept. of Environmental Conservation

2. Payee ID refers to your 9-digit Federal Employer Identification Number (EIN). If you were assigned a Payee Additional Code by New York State, enter it in the box marked ‘Additional’.

3. Enter your 9-digit Zip+4 Zip Code only if you have been assigned a Payee Additional Code by New York State.

4. Payee name and address

5. Reference or invoice number: The Division of Lands and Forests uses the contract number followed by a dash and the payment number (e.g., C12345G-1)

6. Description of Charges should reference the Expenditure Report(s) that detail the Amount(s) listed (e.g., Payment for expenditures for contract C12345G as detailed on the attached Expenditure Report #1)

   If the Expenditure Report has multiple pages or if multiple Expenditure Reports are included on one State Aid Voucher, use a separate description and amount line for each, with a reference to the report and/or page number in each description.

7. Name of the State Aid or Grant Program

8. Payee Certification, including signature, date, title, and municipality/organization

**FINAL CLOSE-OUT PAYMENT REQUEST MUST ALSO INCLUDE:**

**C. Final Payment Release Form**

NOTE: A final payment will be made to the Recipient only upon receipt by the Department of the final product deliverables, as defined in Contract Attachment C – Work Plan.