

COUNCIL ON DOMESTIC VIOLENCE AND SEXUAL ASSAULT

VICTIM SERVICES PROGRAMS

FY REPORTING AND DUE DATES

Please make sure you are using **FY17** forms and instructions. Current Reporting Forms can be found on the CDVSA website at: <http://www.dps.state.ak.us/cdvsa> under the tab titled "Grantee Support". We will **not** accept documents submitted using old reporting forms. If you use old reporting forms, we will **return** them as we require the current forms.

Submit all forms/reports to the CDVSA Reporting Group electronically through email. If you have any questions or need further instructions, please contact your assigned CDVSA Program Coordinator.

Email address:

CDVSA.Program.Reporting@alaska.gov

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REPORT SUBMISSION

1. Documents that require signatures:
 - a. These should be emailed as a PDF document.
 - b. Please keep the originals in your files.
 - c. **Do not** mail hard copy originals to the Council office.
 - d. The documents that require signatures are:
 - Grant Award Notification (GAN)
 - CDVSA Grant Award Conditions
 - FVPSA & VOCA Award Conditions (if applicable)
 - Assurances
 - Quarterly Expenditure/Revenue Report
 - Request for Line Item Budget Revision (if needed)
 - Equipment Inventory

2. Performance Report:
 - a. Email as an attachment to CDVSA Reporting Group.
 - b. Submit it as a separate document.

DUE AT BEGINNING OF YEAR

- Grant Award Notification**
- Authorizing Official**
- CDVSA Victim Services Award Conditions**
- Assurances**
- FVPSA Grant Award Conditions (if applicable)**
- VOCA Grant Award Conditions (if applicable)**
- VOCA Sub-Grant Worksheet (if applicable)**
- Federal Certifications Form (if applicable)**
- Civil Rights Certification**
- Budget Summary**
- Budget Detail**
- Budget Narrative**
 - Please cross reference the GAN, Budget Detail, and Budget Summary to ensure accuracy and consistency.
 - The Budget Narrative must accurately support the Budget Detail. Costs that are not properly supported in the Narrative, or are not allowable, may be excluded from any approved budget. Programs must use consistent position titles throughout the documents.
 - Verify that the required match amount as shown on the GAN (or AMENDED GAN) has been met.

DUE QUARTERLY

Quarter	Dates of Quarter	Due Date for Quarterly Reporting
Q1	July 1 st -September 30 th	October 30 th
Q2	October 1 st -December 31 st	January 30 th
Q3	January 1 st -March 31 st	April 30 th
Q4	April 1 st -June 30 th	July 30 th

□ Quarterly Expenditure/Revenue Report

Provide the following information:

- Fiscal year
- Grant award number
- Program's name
- The quarter being reported
- Whether it is the original or a revised report
- **Report expenditures and revenue using only whole numbers, rounded, without \$ signs.**
- **Use the comma as a thousands separator.**

Expenditures: The first section, “CDVSA Expenditures,” is for reporting quarterly expenditures.

- The Annual Budget Column must show the amounts as budgeted in your CDVSA approved budget.
- The next columns are for first, second, third and fourth quarter expenditures.
- Because this is an Excel spreadsheet, the columns Year-to-Date Total (YTD Total) and Year-To-Date % (YTD %) will automatically populate.

CDVSA EXPENDITURES	Annual Budget	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	YTD Total	YTD %
Personal Services						0	#DIV/0!
Travel						0	#DIV/0!
Facility						0	#DIV/0!
Commodities						0	#DIV/0!
Equipment						0	#DIV/0!
Other Contractual						0	#DIV/0!
Indirect Costs						0	#DIV/0!
Total CDVSA Expenditure	0	0	0	0	0	0	#DIV/0!

Revenue: The second section is the “Revenue” section.

- The Annual Budget column reflects the grant award amount from the **Total** row on the GAN, or Amended GAN.
- In the successive columns, indicate the amount of funds **received** within the reporting quarter.

REVENUE (Award Amount)	Annual Budget	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	YTD Total	YTD %
CDVSA						0	#DIV/0!
TOTAL REVENUE	0	0	0	0	0	0	#DIV/0!

Match: The third section, “Required Match”, reports your program’s required matching support of cash (cash donations, other grants, revenue from fundraisers, etc.) and/or in-kind (volunteer hours, item donations, pro-bono contractible services, etc.) during the quarter.

- Annual Budget column reflects the Match Required amount from the **Total** row on the GAN.
- In the successive columns, indicate the amount expended within the reporting quarter.
- *Match does not need to be applied at the exact time or in proportion to the obligation of Council funds as long as full amount is obligated within grant period (aka the Fiscal Year).*

	Annual Budget	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	YTD Total	YTD %
REQUIRED MATCH							
Match						0	#DIV/0!
TOTAL REQUIRED MATCH	0	0	0	0	0	0	#DIV/0!

Quarterly Tax Filing Dates: The fourth section is for reporting your quarterly tax filing dates.

	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
Quarterly Tax Filing Dates				
IRS Form 941				
AK Dept of Labor Form 1004				

Required Expenditure Narrative: The budget narrative is **required** for each quarter.

<p>Required Expenditure Narrative:</p> <p>Is your program on track to expend this grant in its entirety by the end of the fiscal year?</p> <p>If no, please explain:</p>

- Please have the report signed and dated by the appropriate signatory.
- Keep the original copy in your files.

Quarterly Narrative Report

Provide the following information:

- Fiscal year
- Grant award number
- Program's name
- The quarter being reported
- All requested information in grids, including information from previous quarters.
- All requested narrative information.

- Please refrain from including information that could identify your program participants.
- Please note that the size of the font and text boxes are fixed, allowing for a limited amount of information. This is intentional, so please be concise as needed in your reporting.
- As the information in your Narrative Report is compiled into a report for the quarterly Council meetings, please write in the third person (i.e. program name did X, rather than we did X).

❑ **Quarterly Outcome Measures Progress Report** (include reporting instructions and survey)

Provide the following information:

- Fiscal year
- Grant award number
- The quarter being reported
- Program's name
- All requested results from Outcome Measure Surveys
- Specifics on how staff helped elicit these results

❑ **Quarterly Education & Community Coordination Training Report**

Provide the following information:

- Fiscal year
- Grant award number
- The quarter being reported
- Program's name
- All requested trainings, presentations, and media or special interest events

➤ Each Quarterly Report should include information from all previous quarters.

❑ **Funds Advance**

As long as grant award conditions are met, this is the typical schedule for Advances:

- Quarter 1 Advance= 25% of the grant award
- Quarter 2 Advance= 25% of the grant award
- Quarter 3 Advance= 25% of the grant award
- Quarter 4 1st Advance= 2/3 of 25% of the grant award
- Quarter 4 2nd Advance= 1/3 of 25% of the grant award

Programs will no longer need to sign and submit a Request for Advance, as Advances will now be issued automatically each quarter. However, if the program is underspent coming into the fourth quarter, CDVSA will withhold a corresponding amount from the fourth quarter advance and may redistribute that amount to other programs. Programs that are underspent may request approval for the fourth quarter advance by communicating with their program coordinator.

DUE ANNUALLY

❑ **Compliance with On-Site Evaluation Recommendations**

- Grant award conditions require programs to be in compliance with all on-site recommendations and provide corrective documentation showing this compliance according to the following schedule:
 - For recommendations received July 1-June 30 of one Fiscal Year, corrective documentation must be submitted to the Council office **no later than December 31** of the following Fiscal Year.

❑ **CDVSA Equipment Inventory Report (*due no later than January 30th*)**

Provide the following information:

- Fiscal year
- Grant award number
- Program's name

As noted in Council regulation **13 AAC 95.320(i)(j)(k)**, programs are required to provide a copy of an updated inventory list, identifying non-expendable personal property which:

- Was purchased using **Council funds only** and
- Cost \$500 or more at the time of purchase.

This is an ongoing inventory report, not just what was purchased the prior year.

- Please have the report signed and dated by the appropriate signatory.
- Keep the original copy in your files.
- If you have not spent CDVSA funds on equipment, please submit this form blank and signed by the Authorizing Official.

❑ **FVPSA End of Year Performance Report, *if applicable (due no later than July 30th)***

Provide the following information:

- Fiscal year
- Grant award number
- Program's name
- All requested narrative information.

- Please refrain from including information that could identify your program participants.
- Please note that the size of the font and text boxes are fixed, allowing for a limited amount of information. This is intentional, so please be concise as needed in your reporting.

❑ **FVPSA Letter, if applicable (due no later than July 30th)**

- Please draft this letter on your agency's letterhead in the following format:

(CURRENT DATE)

(CDVSA Program Coordinator)

State of Alaska

Council on Domestic Violence and Sexual Assault

P.O. Box 111200

Juneau, AK 99811-1200

(CDVSA Program Coordinator):

This letter is to certify that (program name) received (amount) in DHHS, Family Violence Prevention Act (FVPSA) funds in Alaska's fiscal year (fiscal year). FVPSA funds were expended according to funding requirements. This funding was used to provide direct service staff for our domestic violence services to women and their children. The advocate staff provided emergency shelter, group & individual support, education and a twenty-four hour crisis line in our service region. As a result of this funding, further incidents of family violence were prevented.

Sincerely,

(Agency Authorized Signer signature)

❑ **VOCA End of Year Performance Report, if applicable (due no later than July 30th)**

Provide the following information:

- Fiscal year
 - Grant award number
 - Program's name
 - All requested narrative information.
- Please refrain from including information that could identify your program participants.
- Please note that the size of the font and text boxes are fixed, allowing for a limited amount of information. This is intentional, so please be concise as needed in your reporting.

DUE AS NEEDED

□ Request for Line Item Budget Revision (*due as needed by program, but no later than July 15th*)

Provide the following information:

- Fiscal year
- Grant award number
- Program's name

1) Requests for Line Item Budget Revisions are required when:

- A program anticipates expending 10% or \$5,000 (whichever is **less**) over the amount in a budget category.
 - Changes between budget categories such as Personal Services, Travel, Equipment, etc., require a Council-approved budget revision.
- Any CDVSA approved budget category is \$0 (for example, \$0 for the Equipment Category) and you plan to spend Council funds in that category, *regardless of the amount*.

2) The request must be on the proper form, submitted, and approved **prior** to making budget changes.

3) On the form, show the original budget in ALL budget categories, not just for those that you are requesting a change.

4) Show the revised budget amount in the provided column.

5) Again, requests must be approved **prior** to making budget changes. Even if you have discussed the proposed revision in a letter or by telephone, **no budget revision can be considered approved until it has been submitted on the proper form and signed off by Council staff**.

Example: You have \$4,000 in your CDVSA approved budget for Equipment. In the second quarter, your printer breaks down, and you need to purchase a new one, so you decide to move \$2,500 from Personal Services to Equipment to purchase a new printer. Do you need to submit a budget revision? **YES.** \$2,500 is smaller than the \$5,000 minimum; however, it is more than 10% of the original Equipment budget. 10% of the original Equipment budget category is \$400. Therefore, a Request for Line Item Budget Revision is necessary.

6) If you make a budgetary reallocation of less than \$5,000 or 10% of a budget line, please note that you need to notify the Council office within thirty days after the reallocation has taken place. This requirement is covered in Council regulation 13 AAC 95.300(e)(2). Use a Request for Line Item Budget Revision Form and note on the form that the revision is not subject to Council approval.

7) In all cases, use the revised budget category amounts for your quarterly reports.

- Please have the report signed and dated by the appropriate signatory.
- Keep the original copy in your files.

□ **Program Board Members Reporting Form (due quarterly if changes occurred)**

Provide the following information:

- Fiscal year
- Grant award number
- Program's name
- Updated make-up of the Board

Match definitions:

In-kind: In-kind match that is allowable would include volunteer services as defined below, facilities, equipment, and supplies loaned or given to the program for its use during the fiscal year.

Volunteer Services: Should be computed at a rate based on the particular service provided and the cost of that service in the community where the service is delivered. The service should be documented as well as the method for determining the rate used to calculate match. Only time donated for office support, community presentations and public relations, fundraising, and other direct services to participants may be included. Board members' time devoted to activities defined as "volunteer" may be included but not time devoted to the regular meetings of the board itself.

Cash funds: Funds in the form of cash from donations, fees, local funds, etc. which are not attributable to the grant award made by the Council on Domestic Violence and Sexual Assault.