

# Welcome to E-Grants 5310 Reimbursement Request Processing Training



## Presenters:

Diane Ohde-

Lindsay Post-

Sara Allred-

E-Grants System Administrator

5310 Program Manager—Southeast Arizona

Transit Program Manager

# Agenda

- Welcome and introduction
- Presentation on Reimbursement Requests
- Demonstration of Reimbursement Request entry
- What is an Eligible Expense under 5310?
- In-kind match in E-Grants
- Contract Reporting

# E-GRANTS

ADOT

System Login

Portal Home

## E-Grants Reimbursements Begin October 2018

- Operations, Preventive Maintenance, Mobility Management
  - Paper BSRs still required for RTAP reimbursement
- Active Grant Status required to bill
- Please coordinate with us if you still need to get Certifications and Assurances, Title VI Plans, and signed Exhibit A's



# E-Grants 5310 Reimbursement Request Processing

2018 5310 Application

Presenter: Diane Ohde  
E-Grants System Administrator

# To Login to E-Grants



## Welcome to E-Grants

This is E-Grants, ADOT's Grant Management Software for Grant applications and overall management for the grant lifecycle. At this time, the E-Grants system is only available to accept transit grant applications.

Please note that Internet Explorer is the only supported browser for E-Grants. Using other browsers may cause technical issues.

### Steps to Get Started:

- The initial registration for your organization must be completed by an Organization Administrator for the organization; e.g. Program Director
- Once the Organization Administrator registers the organization, they will receive an email *Notification of Access Approval* from the online systems administrator
- Once your organization is registered in the system, you can apply for grants, complete/submit reports and submit requests for reimbursement.

New Users Register [HERE](#)

Login

Username

Password

[New User Registration](#)

[Forgot Password?](#)

*Use Internet Explorer to Access E-Grants*

<https://egrants.azdot.gov>

*Login with Username & Password*

# My Applications



[Back](#)

## My Applications

Use the search functionality below to find a specific Application.

### Search Applications

Application Types   ←

Application Name

Person

Status

Organization  ←

Year

Choose **Application Type**, type your **Organization Name** and click **SEARCH**.

# E-GRANTS



My Home | My Applications | My Reimbursement Requests | My GAEs | My Assets

My Reports | My Administration | My Organization(s) | My Profile | Logout

SHOW HELP

[Back](#)

## My Applications

Use the search functionality below to find a specific Application.

### Search Applications

Application Types:

Application Name:

Person:

Status:

Organization:

Year:

Export Results to:  Sort by:

Number of Results 1

Document Type	Organization	Name	Current Status	Year
5310 Application	<a href="#">Town of Oro Valley</a>	<a href="#">5310-2017-Town of Or-00015</a>	Active Grant	2017

1

Click on the Application **Name**.

# 5310 Application Menu

[Back](#)

## 5310 Application Menu

Document Information: [5310-2017-smith12314-00004](#)

[Details](#)

Info	Document Type	Organization	Role	Current Status	Period Date / Date Due
	5310 Application	<a href="#">Krystal Smith 1234</a>	AGENCY Organization Administrator	Active Grant	11/12/2016 - 01/01/2019 02/16/2020 12:00PM PST

### View, Edit and Complete Forms

Select the **View Forms** button below to view, edit, and complete forms.

[VIEW FORMS](#)

### Change the Status

Select the **View Status Options** button below to perform actions such as submitting applications or request modifications.

[VIEW STATUS OPTIONS](#)

### Tools

Select the **View Management Tools** button below to perform actions such as adding people to this document or viewing the document history.

[VIEW MANAGEMENT TOOLS](#)

### Contracts, Invoices, & Reporting

Select the **View Related Items** button below to view related items such as Contracts, Invoices, Reporting, and system messages.

[VIEW RELATED ITEMS](#)

*Under **Contracts, Invoices, & Reporting**, click on **View Related Items***

# 5310 Application Menu-Related Items

## 5310 Application Menu - Related Items

The various sections below can link to items that are associated with this document.

Document Information: [5310-2018-smith12314-00008](#)

 [Details](#)

### Related Documents

Sort search results by:  Filter by Document Type:

Document Type	Name	Current Status	Period Date / Date Due	Created By	Last Modified By
Reimbursement Request	<a href="#">Initiate a Reimbursement Request 2018</a>				

Click on *Initiate a/an Reimbursement Request 2018*.

# Reimbursement Request Menu



My Home | My Applications | My Reimbursement Requests

My Organization(s) | My Profile | Logout

SHOW HELP

 [Back](#)

## Generic Reimbursement Request Menu

Document Information: [5310RRJun-2018-smith12314-00045](#)

Parent Information: [5310-2017-smith12314-00004](#)

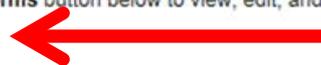
 [Details](#)

Info	Document Type	Organization	Role	Current Status	Period Date / Date Due
	Generic Reimbursement Request	<a href="#">Krystal Smith 1234</a>	AGENCY Organization Administrator	Reimbursement Request in Progress	N/A - N/A N/A

## View, Edit and Complete Forms

Select the **View Forms** button below to view, edit, and complete forms.

[VIEW FORMS](#)



Under **View, Edit and Complete Forms**,  
Click on **View Forms**.

# Reimbursement Request Menu-Forms

The screenshot shows a web application interface. At the top, there is a navigation bar with three tabs: "My Home", "My Applications", and "My Reimbursement Requests". To the right of the tabs, there are links for "My Organization(s)", "My Profile", and "Logout". A "SHOW HELP" button is located in the top right corner. Below the navigation bar, there is a "Back" button. The main heading is "Generic Reimbursement Request Menu - Forms". Below the heading, there is a message: "Please complete all required forms below." There are two lines of document information: "Document Information: [5310RRJun-2018-smith12314-00045](#)" and "Parent Information: [5310-2017-smith12314-00004](#)". A "Details" button is located below the parent information. The "Forms" section contains a table with the following data:

Status	Page Name	Note	Created By	Last Modified By
	<a href="#">Reimbursement Request</a>		DianeTest OhdeTest 4/4/2018 2:23:37 PM	DianeTest OhdeTest 4/5/2018 2:34:49 PM

A red arrow points to the "Reimbursement Request" link in the table. Below the table, there is a "Top of the Page" button. At the bottom of the page, there is a footer with the text "Powered by IntelliGrants™" and "© Copyright 2000-2018 Agate Software, Inc."

Click on **Reimbursement Request**.

# Reimbursement Request

The screenshot shows the E-GRANTS interface. At the top, there is a navigation bar with 'My Home', 'My Applications', and 'My Reimbursement Requests'. Below this, there are buttons for 'SAVE', 'ADD NOTE', and 'CHECK GLOBAL ERRORS'. A red arrow points from the text 'A list of error messages will display.' to the 'CHECK GLOBAL ERRORS' button.

**Page Error(s):**

- Your information has been saved and the following Page Error(s) have been found.
- A billing period is required.
- Fare Revenue is Required for Operating.
- Project Complete selection is required.
- Please attach Back-up Documentation.
- Please confirm that you have entered your contract reporting into the LPA database for this billing period.
- Please check I agree to certify expenses submitted are eligible.
- Passenger Trips, Volunteer Drivers, Project Revenue, Personal Vehicles, Deadhead Miles, Major Incidents, Total Project, Major Injuries, Vehicle Service, Fatalities, and Fare Revenue are required for Operating awards.

**Page Warning(s):**

You have selected Yes for Project Complete. No further billing will be allowed.

[Back](#)

Document Information: [5310RR-smith12314-00421](#)  
Parent Information: [5310-2018-smith12314-00008](#)

[Details](#)

You are here: > [Reimbursement Request Menu](#) > [Forms Menu](#) > Reimbursement Request

*A list of error messages will display.*

*You will receive a Page Warning if an award line has been marked complete.*

# Reimbursement Request

Document Information: [5310RRJan-2018-smith12314-00036](#)

Parent Information: [5310-2017-smith12314-00004](#)

[Details](#)

## REIMBURSEMENT REQUEST

### Instructions:

- For the service period, include the entire month or quarter for the reimbursement you are requesting.
- E-Grants will auto-fill the invoice number for you or you can update with your internal Invoice #.
- The Reimbursement Request Amount should include the total paid, not just the federal portion.
- ADOT Procured items will not display on this form.
- Any Adjustments for prior reimbursements should be documented in the comments section with supporting documentation.

### Local Match Instructions

- Enter the cash match expended by source with the source identified
- All In-kind match must be approved by ADOT during the award process.
- Enter the in-kind match units (ie. Volunteer hours or sq ft. etc...) expended this billing period only.

Agency Name: Krystal Smith 1234	Billing Period: <input type="text" value="January"/> <input type="text" value="2018"/>
Grant Award Year: 2017 Grant Program: 5310	Invoice Number: <input type="text" value="1718KRY5310-01"/>
Warrant Number:	Invoice Date: Mar 28, 2018

The **Document Information** name will update with the **Billing Period** selected when you **SAVE**.

Invoice numbers must be unique.

# Reimbursement Request

Project Title	Fed Match Ratio	Reimbursement Request	Fares/ Deduction	Total Request	Contract Cumulative	Balance	Award Amount	% Expended	Federal Portion	Local Match Portion	Project Complete
MM Computers 1	80%	\$1,000.00		\$1,000.00	\$1,000.00	\$61,500.00	\$62,500.00	2%	\$800.00	\$200.00	<input type="radio"/> Yes <input checked="" type="radio"/> No
MM Computers 2	80%			\$0	\$0	\$250,000.00	\$250,000.00	0%	\$0	\$0	<input type="radio"/> Yes <input checked="" type="radio"/> No
MM Staffing 1	80%			\$0	\$0	\$25,000.00	\$25,000.00	0%	\$0	\$0	<input type="radio"/> Yes <input checked="" type="radio"/> No
MM Staffing 2	80%			\$0	\$0	\$50,000.00	\$50,000.00	0%	\$0	\$0	<input type="radio"/> Yes <input checked="" type="radio"/> No
MM Program Manager 1	80%			\$0	\$0	\$25,000.00	\$25,000.00	0%	\$0	\$0	<input type="radio"/> Yes <input checked="" type="radio"/> No
MM Program Manager 2	80%			\$0	\$0	\$37,500.00	\$37,500.00	0%	\$0	\$0	<input type="radio"/> Yes <input checked="" type="radio"/> No
Operating 1	50%	\$15,000.00	\$0	\$15,000.00	\$15,000.00	\$5,000.00	\$20,000.00	75%	\$7,500.00	\$7,500.00	<input type="radio"/> Yes <input checked="" type="radio"/> No
Operating 2	50%		\$0	\$0	\$0	\$40,000.00	\$40,000.00	0%	\$0	\$0	<input type="radio"/> Yes <input checked="" type="radio"/> No
14 Pass Cut with Lift VIN 2558	90%	\$69,000.00		\$69,000.00	\$69,000.00	\$0	\$69,000.00	100%	\$62,100.00	\$6,900.00	<input checked="" type="radio"/> Yes <input type="radio"/> No
14 Pass Cut 4x4 with Lift VIN 6987	90%			\$0	\$0	\$87,000.00	\$87,000.00	0%	\$0	\$0	<input type="radio"/> Yes <input checked="" type="radio"/> No
9 Pass Cut with Lift VIN 1257	90%			\$0	\$0	\$66,392.22	\$66,392.22	0%	\$0	\$0	<input type="radio"/> Yes <input checked="" type="radio"/> No
9 Pass Cut 4x4 with Lift VIN 5846	90%			\$0	\$0	\$86,446.67	\$86,446.67	0%	\$0	\$0	<input type="radio"/> Yes <input checked="" type="radio"/> No
7 Pass Mini No Ramp VIN 6328	80%			\$0	\$0	\$26,785.00	\$26,785.00	0%	\$0	\$0	<input type="radio"/> Yes <input checked="" type="radio"/> No
7 Pass Mini with Ramp VIN 4158	80%			\$0	\$0	\$46,500.00	\$46,500.00	0%	\$0	\$0	<input type="radio"/> Yes <input checked="" type="radio"/> No
ADA Van VIN 6332	80%			\$0	\$0	\$56,018.75	\$56,018.75	0%	\$0	\$0	<input type="radio"/> Yes <input checked="" type="radio"/> No
Transit Van VIN 4785	80%			\$0	\$0	\$63,282.50	\$63,282.50	0%	\$0	\$0	<input type="radio"/> Yes <input checked="" type="radio"/> No
12 Pass Van No Lift VIN 5421	90%			\$0	\$0	\$25,000.00	\$25,000.00	0%	\$0	\$0	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>Totals</b>		<b>\$85,000.00</b>	<b>\$0</b>	<b>\$85,000.00</b>	<b>\$85,000.00</b>	<b>\$951,425.14</b>	<b>\$1,036,425.14</b>	<b>8%</b>	<b>\$70,400.00</b>	<b>\$14,600.00</b>	

**Enter your total *Reimbursement Request* amount (Federal and Local). *Fares/Deduction* is required for Operating projects.**

# Reimbursement Request

ATTACH BACK-UP DOCUMENTATION   DELETE  
 36479-ADOTTRACKING1STAND2NDQTR.xlsx

ATTACH BACK-UP DOCUMENTATION

**BACK-UP DOCUMENTATION** is required.

Cash Match Only	
Local Match Expended	Source
\$4,100.00	
\$0	Total Cash Match

Approved Indirect Cost Allocation Rate
2.00%

*Cash Match Only* amount should be equal to or exceed the requested **Local Match Portion**.

In-Kind Match					
In-Kind Match Units Expended	Billing Period In-Kind Match Total	Project Title	Source of Donations / Service		Value of Service / Donation
1	\$200.00	Mobility Management	County	In-Kind	\$200.00 per Each
Total	\$200.00				

*In-Kind Match* data is pulled from the **Local Match** page on your grant application.

MATCH TRACKING	
Total In-Kind match approved	\$10,000.00
Total In-Kind Expended to date	\$400.00
Remaining Balance In-Kind	\$9,600.00
Billing Period Cash Match	\$0
Billing Period Total Match Paid	\$200.00

PERFORMANCE DATA					
* Passenger Trips	6	Cost/Pass. Trip:	\$333.33	* Volunteer Drivers (people)	0
* Project Revenue Miles	6	Cost/Mile:	\$333.33	* Personal Vehicles in Service	0
* Deadhead Miles	0	Cost/Serv. Hr.:	\$0	* Major Incidents	0
* Total Project Miles	6	Passenger/Mile:	1.00	* Major Injuries	0
* Vehicle Service Hours	3	Passenger/Srv. Hr.:	2.00	* Fatalities	0
* Fare Revenue	0				

All fields must be completed in the **Performance Data** section. Enter zeros in areas that do not apply.

# Reimbursement Request

Please confirm, as part of the DBE program, all contract payments invoiced have been entered in LPA system.  
<https://arizonalpa.dbesystem.com/>

I Agree

As required by 2 C.F.R. 200.415, by checking the box below, the grantee is 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 Federal award. I have engaged in local and regional coordination activities to the best of my ability. 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). Supporting documentation shall be available to auditors and/or ADOT representatives upon request and if required, pursuant to contract clause 2.r, provided as an attachment.

I Agree

COMMENTS

0 of 3000

*Click on link to enter contract reporting information.*

*By selecting **I Agree** you are certifying you have completed the requirements. Click Save button.*

# Reimbursement Request

 Your information has been saved and the following Page Error(s) have been found.

- The Total Cash Match Expended must be equal or greater than the Total Local Match Portion Requested.
- Please confirm that you have entered your contract reporting into the LPA database for this billing period.
- Please check I agree to certify expenses submitted are eligible.

 Page Warning(s)

You have selected Yes for Project Complete. No further billing will be allowed.



*The system will display error messages for incomplete data or when system business rules are not met. You will need to go back and make necessary corrections as instructed.*

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Document Information: [5310RRFeb-2018-smith12314-00037](#)

Parent Information: [5310-2017-smith12314-00004](#)

 [Details](#)

## **REIMBURSEMENT REQUEST**

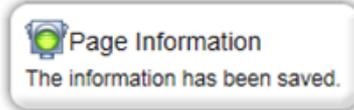
### **Instructions:**

- For the service period, include the entire month or quarter for the reimbursement you are requesting.
- E-Grants will auto-fill the invoice number for you or you can update with your internal Invoice #.
- The Reimbursement Request Amount should include the total paid, not just the federal portion.
- ADOT Procured items will not display on this form.
- Any Adjustments for prior reimbursements should be documented in the comments section with supporting documentation.

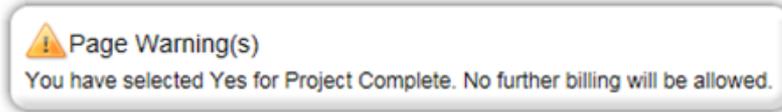
### **Local Match Instructions**

- Enter the cash match expended by source with the source identified
- All In-kind match must be approved by ADOT during the award process.
- Enter the in-kind match units (ie. Volunteer hours or sq ft. etc...) expended this billing period only.

# Reimbursement Request



If all errors are corrected, you will see this message,  
***"The information has been saved."***



Document Information: [5310RRMar-2018-smith12314-00038](#)

Parent Information: [5310-2017-smith12314-00004](#)



## REIMBURSEMENT REQUEST

### Instructions:

- For the service period, include the entire month or quarter for the reimbursement you are requesting.
- E-Grants will auto-fill the invoice number for you or you can update with your internal Invoice #.
- The Reimbursement Request Amount should include the total paid, not just the federal portion.
- ADOT Procured items will not display on this form.
- Any Adjustments for prior reimbursements should be documented in the comments section with supporting documentation.

### Local Match Instructions

- Enter the cash match expended by source with the source identified
- All In-kind match must be approved by ADOT during the award process.
- Enter the in-kind match units (ie. Volunteer hours or sq ft. etc...) expended this billing period only.

Select **Document Information** filename to return to  
**Reimbursement Request Menu** page.

# Reimbursement Request Menu

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## 5310 Application Menu

Document Information: [5310-2017-smith12314-00004](#)

[Details](#)

Info	Document Type	Organization	Role	Current Status	Period Date / Date Due
	5310 Application	<a href="#">Krystal Smith 1234</a>	AGENCY Organization Administrator	Active Grant	11/12/2016 - 01/01/2019 02/16/2020 12:00PM PST

### View, Edit and Complete Forms

Select the **View Forms** button below to view, edit, and complete forms.

[VIEW FORMS](#)

### Change the Status

Select the **View Status Options** button below to perform actions such as submitting applications or request modifications.

[VIEW STATUS OPTIONS](#)



### Tools

Select the **View Management Tools** button below to perform actions such as adding people to this document or viewing the document history.

[VIEW MANAGEMENT TOOLS](#)

### Contracts, Invoices, & Reporting

Select the **View Related Items** button below to view related items such as Contracts, Invoices, Reporting, and system messages.

[VIEW RELATED ITEMS](#)

*Under **Change the Status**, Click on **View Status Options**.*

# Reimbursement Request Menu- Status Options

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## Generic Reimbursement Request Menu - Status Options

Select a button below to execute the appropriate status push.

Document Information: [5310RRJun-2018-smith12314-00045](#)

Parent Information: [5310-2017-smith12314-00004](#)

 [Details](#)

### Possible Statuses

REIMBURSEMENT REQUEST SUBMITTED

[APPLY STATUS](#)



REIMBURSEMENT REQUEST CANCELLED

[APPLY STATUS](#)

*Under **Possible Statuses** - **Reimbursement Request Submitted**, click on **Apply Status**.*

# Initiating Multiple Requests Not Allowed

 [Back](#)

 Global Errors

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Additional Reimbursement Request can not be initiated if previous ones have not been completed.

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*Only one reimbursement request can be submitted at a time. If you attempt to initiate a 2<sup>nd</sup> request before the 1<sup>st</sup> request is approved by the Program Manager, you will get the error message above.*

# Questions ?

**THANK YOU!**

**Any E-Grants questions can be directed to:**

**Diane Ohde** at [dohde@azdot.gov](mailto:dohde@azdot.gov)

# Eligible Expenses

**Direct Costs** – Those that can be associated on a one-to-one basis with an approved service (e.g. wages, fuel, maintenance costs)

- Most are variable that change with the amount of service provided

**Indirect Costs** – include planning, accounting, legal services, etc.

- Agencies must have an approved ICAP in order to be reimbursed for indirect costs

# Eligible Expenses

## Cost Reimbursement Criteria

- Be necessary and reasonable for proper and efficient performance and administration of the project
- Be an eligible expense
- Be treated consistently
- Be determined in accordance with GAAP
- Not be included as a cost used to meet cost sharing or matching requirements of any other federal award
- Be adequately documented

## In-Kind Match

Non-cash (in-kind) match may be used as local match ONLY if the applicant formally documents the value of each non-cash amount.

## In E-Grants

- Check local match page to ensure values are billable monthly or quarterly increments
- Communicate any changes need to the local match page to Ann Cochran or Lindsay Post
- Cannot be used to match another grant
- Attach backup documentation

# Contract Reporting Requirements

# Questions ?

**THANK YOU!**

**Any 5310 Program questions can be directed to the 5310 Transit Program  
Managers:**

**Ann Cochran** [acochran@azdot.gov](mailto:acochran@azdot.gov)

**or**

**Lindsay Post** [lpost@azdot.gov](mailto:lpost@azdot.gov)