

MAINTENANCE GRANT REIMBURSEMENT

PLEASE SUBMIT FORM AND REQUIRED MATERIALS TO: Alexandra Morrison <u>amorrison@capitolregionwd.org</u>

INSTRUCTIONS:

Due by December 1st of each year. Include work completed this calendar year. CRWD staff will use the information submitted to calculate the final grant reimbursement amount. Attach additional sheets as necessary.

GRANT CONSIDERATIONS:

- CRWD will reimburse 50% (75% if in Focus Area) of total eligible maintenance value
- Grant reimbursement <u>cannot</u> exceed Actual Costs spent
- Minimum grant amount is \$200 per year
- Maximum grant amount is \$2,000 per year

| GRANTEE INFORMATION | | |
|--|---------|--|
| NAME | | |
| CHECK PAYABLE TO (if different from above) | | |
| MAILING ADDRESS FOR REIMBURSEMENT CHECK | EMAIL | |
| CITY, STATE, ZIP | PHONE # | |
| | | |
| DESCRIPTION OF WORK COMPLETED THIS Y | EAR | |
| | | |
| | | |
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| | | |
| | | |
| | | |

| TABLE 1. ACTUAL COSTS | | |
|--|----------------|------|
| Materials, professional contracting, paid staff time, etc. | | |
| ITEM | DATE | COST |
| | + | |
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| | | |
| | TABLE 1. TOTAL | \$ |
| | | |

TABLE 2. GRANTEE / VOLUNTEER HOURS

Grantee and volunteer hours are not a directly reimbursable expense but can be credited towards maintenance value at \$25/hour/person (reduces grantee's overall financial contribution).

| DATE | DESCRIPTION | NUMBER OF X NUMBER INDIVIDUALS OF HOUR | |
|------|-------------|--|------|
| | | | \$25 |
| | | | \$25 |
| | | | \$25 |
| | | | \$25 |
| | | | \$25 |
| | | | \$25 |
| | | | \$25 |
| | | | \$25 |
| | | | \$25 |
| | | | \$25 |

(Attach additional sheets if necessary)

TABLE 2. TOTAL \$

| REQUESTED MAINTENANCE GRANT REIMBURSEMENT | | |
|--|----|---|
| A) MAINTENANCE VALUE Table 1 Total + Table 2 Total | \$ | |
| B) GRANT % 50%, or 75% if in Focus Area | | % |
| C) CALCULATED GRANT AMOUNT Maintenance Value (a) x Grant % (b) | \$ | |
| D) REQUESTED GRANT AMOUNT Amount cannot exceed Table 1 Total and must be \$200 - \$2,000 | \$ | |

See examples on page 4.

REQUIRED ATTACHMENTS:

Please attach <u>itemized receipts</u>, <u>paid invoices</u>, <u>and/or volunteer logs for each item</u>. Items without a receipt will not be eligible for reimbursement. Staff will review reimbursement request and a check for the grant amount will be mailed to the address provided within 60 days from approval.

| GRANTEE CERTIFICATION & APPROV | AL | |
|---|--|-----|
| I certify that this is an accurate and true sum | mation of the actual costs of labor, equipment and materials used | |
| for the above-mentioned project. In cases w | ere the receipts included items that were not previously approved, | , I |
| have made necessary corrections. | | |
| NAME | | |
| | | |
| SIGNATURE | DATE | |
| | | |
| | | |

Maintenance Grant Reimbursement Examples

Example 1:

| ACTUAL COSTS | | |
|---|------------------|--|
| Replacement Plants | \$500 | |
| Contracted Professional Labor | \$500 | |
| Total | \$1,000 | |
| GRANTEE / VOLUNTEER HOURS | | |
| None | | |
| Total | \$0 | |
| MAINTENANCE VALUE | \$1,000 | |
| Actual Costs + Volunteer Hours | | |
| GRANT % | 50% | |
| 50%, or 75% if in Focus Area | | |
| CALCULATED GRANT AMOUNT | \$500.00 | |
| Maintenance value x Grant % | \$ 500.00 | |
| REQUESTED GRANT AMOUNT | \$500.00 | |
| Amount <u>cannot</u> Actual Costs and must be \$200-\$2,000 | | |

\$1,000 x 50%, no volunteer hours

Example 2:

| ACTUAL COSTS | |
|--|----------|
| Replacement Plants | \$500 |
| Total | \$500 |
| GRANTEE / VOLUNTEER HOURS | |
| Grantee labor weeding | \$500 |
| (1 person x 20 hr x \$25/hr/person) | |
| Total | \$1000 |
| MAINTENANCE VALUES | \$1,000 |
| Actual Costs + Volunteer Hours | |
| GRANT % | 50% |
| 50%, or 75% if in Focus Area | |
| CALCULATED GRANT AMOUNT | \$500.00 |
| Maintenance Value x Grant % | \$300.00 |
| REQUESTED GRANT AMOUNT | \$500.00 |
| Amount cannot Actual Costs and must be \$200-\$2,000 | |

\$1,000 x 50%, with volunteer hours

Example 3:

| ACTUAL COCTO | |
|--|--------------|
| ACTUAL COSTS | |
| Mulch | \$100 |
| Soil | \$50 |
| Replacement plants | \$200 |
| Total | \$350 |
| GRANTEE / VOLUNTEER HOURS | |
| Grantee labor weeding | \$250 |
| (1 person x 10 hrs x \$25/hr/person) | |
| Grantee planting | \$250 |
| (2 people x 5 hrs x \$25/hr/person) | |
| Total | \$500 |
| MAINTENANCE VALUES | \$850 |
| Actual Costs + Volunteer Hours | |
| GRANT % | 50% |
| 50%, or 75% if in Focus Area | |
| CALCULATED GRANT AMOUNT | \$425 |
| Maintenance Value x Grant % | ⊅42 3 |
| REQUESTED GRANT AMOUNT | \$350 |
| Amount cannot Actual Costs and must be \$200-\$2,000 | |

\$850 x 50% is \$425, but grant amount <u>cannot</u> exceed actual costs

Example 4:

| ACTUAL COSTS | |
|---|------------|
| Paid Maintenance Staff Labor (1 person x 50 hours x \$30/hr) | \$1,500 |
| Plant purchase + delivery | \$500 |
| Tool rental | \$200 |
| Mulch purchase + delivery | \$250 |
| Total | \$2,450 |
| GRANTEE / VOLUNTEER HOURS | |
| Volunteer planting (2 people x 10 hrs x \$25/hr) | \$500 |
| Total | \$500 |
| MAINTENANCE VALUE Actual Costs + Volunteer Hours | \$2,950 |
| GRANT % 50%, or 75% if in Focus Area | 75% |
| CALCULATED GRANT AMOUNT Maintenance Value x Grant % | \$2,212.50 |
| REQUESTED GRANT AMOUNT Amount cannot Actual Costs and must be \$200-\$2,000 | \$2,000 |

\$2,950 x 75% is \$2,212.50, but maximum grant amount is \$2,000

Example 5:

| Example 3. | | |
|--|--------------|--|
| ACTUAL COSTS | | |
| Plant purchase | \$200 | |
| Mulch purchase | \$100 | |
| Total | \$300 | |
| GRANTEE / VOLUNTEER HOURS | | |
| Volunteer planting (1 person x 2 hrs x \$25/hr) | \$50 | |
| Total | \$50 | |
| MAINTENANCE VALUE | \$350 | |
| Actual Costs + Volunteer Hours | | |
| GRANT% | 50% | |
| 50%, or 75% if in Focus Area | | |
| CALCULATED GRANT AMOUNT | | |
| Maintenance Value x Grant % | \$175 | |
| REQUESTED GRANT AMOUNT | \$0 | |
| Amount cannot Actual Costs and must be \$200-\$2,000 | | |

\$350 x 50% is \$175, but minimum grant amount is \$200