

Invoice Completion Check Sheet

Fiscal Management Completion

- Cell B3 - Enter two-digit County Code

Certified Expenditure Levels and Allocations

- Cell B12 – Enter Fiscal Year in format: 2006/2007
- Cell B15 – Enter Date of Certification Letter
- Cells B18:B21 - Enter Certified Expenditure Levels from Certif Letter
- Cells B25:B37 - Certified Revenue Levels from Certification Letter
- Check to ensure Cell B22 (Expenditures) equals Cell B38 (Revenues)

Youth Development Center Charges – Subsequent quarters are entered in Rows 21-22, 25-26 and 29-30

- Cell F17 – Enter date of Letter
- Cell I17:I18 – Enter information from letter indicting charges for the quarter for State Share of YDC/YFC Expenses
- Cell J17:J18 - – Enter information from letter indicting charges for the quarter for County Share of YDC/YFC Expenses
- Verify totals in Cells I19, J19 and K19 with letter.

Other Revenues and Collections – Subsequent quarters entered in columns I-K

- Cell H39 – Enter the amount of Independent Living Grant funds used for the quarter.
- Cell H40 – Enter the amount of HSDF (Human Services Development Fund) funds used for the quarter. These funds will be included in the program income column of the CY370A.
- Cell H41 – Enter the total amount of Title IV-D Collections for the quarter. This is the support income received by Domestic Relations.
- Cell H42 – Enter the portion of the Title IV-D collections entered above hat was received for Title IV-E eligible children.

SPLC Data (Subsidized Permanent Legal Custodianship) Subsequent quarters entered in Rows 46-48

- Cell G45 – Enter the total amount of SPLC subsidies for the quarter.
- Cell H45 – Enter the number of days of care associated with these subsidies for the quarter.
- Cell I45 – Enter the number of children who received SPLC subsidies for the quarter.

RMTS – subsequent quarter entered in columns D, E and F

- Cells C53:C65 – Enter the RMTS State-Wide Counts from the letter for the appropriate quarter.
- Cell C69 – Enter the number of children receiving Title IV-E adoption Assistance Subsidies for the quarter

Invoice Completion Check Sheet (cont'd)

- Cell C70 – Enter the total number of children receiving Adoption Assistance Subsidies for the quarter.
- Cell C71 – Enter the number of Title IV-E eligible children in a foster care placement who have received Title IV-E Maintenance payments or SSI in lieu of Title IV-E Maintenance payments for the quarter.
- Cell C72 – Enter the total number of children in placement for the quarter. This number excludes delinquent children who are NOT Title IV-E eligible.

Individual Quarter Completion

CY370 – Expenditure Report

- Cell C3 – Enter the date the quarterly report will be submitted

Expenditures Columns

- Cells C9:C22 – Enter the Wages and Salaries Expense for each of the In-Home Cost Centers. Notice Cells C23 and C24, Dependent and Delinquent Cost Centers for Juvenile Act Proceedings are shaded. This indicates wages and salaries expenses for these two cost centers are unallowable expenses.
- Cells C28:C37 - Enter the Wages and Salaries Expense for each of the Community-Based Placement Cost Centers.
- Cells C41:C46 - Enter the Wages and Salaries Expense for each of the Institutional Placement Cost Centers.
- Cell C49 - Enter the Wages and Salaries Expense for the Administration Cost Center.
- Repeat the above entries in columns D through H for each of the remaining Major Objects of Expenditure being certain to note the shaded cells indicating non-allowable expenses.

Total Expenditures Column

- No entry is required for this column. Column I is populated with the sum of columns C – H for each cost center.

Children Served by County/ Days of Care Column

- Cells J9:J24 – Enter the number of children who received services provided by the Agency Staff during the quarter for each cost center.
- Cell J26 – Enter the unduplicated number of children receiving ONLY In-Home services provided by C&Y Staff. Do not include any children receiving purchased services in this number.
- Cell J28:J37 – Enter the number of Days of Care associated with the Purchased Services expense for each Community-Based Placement cost center.
- Cell J41:J46 - Enter the number of Days of Care associated with the Purchased Services expense for each Institutional

Invoice Completion Check Sheet (cont'd)

Children Served Purchased Column

- Cells K9:K24 – Enter the number of children services were purchased for during the quarter for each cost center. Any entry in the Purchased Services column should have a corresponding entry in the Children Served Purchased column.
- Cell K28:K37 – Enter the number of Days of Care associated with the Purchased Services expense for each Community-Based Placement cost center.
- Cell K41:K46 - Enter the number of Days of Care associated with the Purchased Services expense for each Institutional Placement cost center.

Non Reimbursable Non-PS/SUB Expenses Column

- Cell L9:L24, L28:L37, L41:L46, L49 – Enter the portions of the Wages, Benefits, Operating and Fixed Assets columns that are not reimbursable with State funds such as:
 - a. Travel exceeding the State Rate
 - b. Unapproved Staff Positions

Non Reimbursable Purchased Services /Subsidies Expenses Column

- Cell M9:M24, M28:M37, M41:M46, M49 – Enter the portions of the Purchased Services and Subsidies columns that are not reimbursable with State funds such as:
 - a. Placements in Un-Licensed facilities

Non-Reimbursable Program Income Column

- Cell N9:N24, N28:N37, N41:N46, N49 – Enter the amount of Program Income related to the Non-Reimbursable Expense received for the quarter such as:
 - a. Funds raised specifically for Non-Reimbursable Costs
 - b. Child Specific Income for children in Non-reimbursable placement facilities.

County Indirects Costs Cell

- Cell F52 – enter the portion of the Operating Expense column associated with County Indirect Costs.
- Note: Amount in excess of the State 2% limit needs to be recorded in the Non-Reimbursable column.

Invoice Completion Check Sheet (cont'd)

CY370A Revenue Report

Total Reimbursable Expenditures Column

- No entry is required in this column. Column C is populated with the result of calculating Total Expenditures Column less the Non-Reimbursable Expenses Column from the CY370 Expenditure Report.

Revenue Sources Columns Completion

- Cells D64:D79, D83:D92, D96:D101, D104 – Enter the Program Income by Cost Center. Revenues that may be included in this column include but are not limited to Parental Support Income, SS and SSI Income, STG funds, HSDF funds and Interest Income.
- Cells E64:E79, E83:E92, E96:E101, E104 – Enter the Title IV-E Direct Revenue by Cost Center. Enter any Independent Living Grant funds in this column under one of the Supervised Independent Living cost centers (Cells E91 and E92) Notice the Juvenile Detention, YDC/YFC and the YDC cost centers are shaded. This indicates expenses in these cost centers are not eligible to reimbursement with Title IV-E funds.
- No entry is required for the Title IV-E Admin column F. This column is populated from the results of the CY918 Administrative Cost Pool Calculation.
- Cells G64:G79, G83:G92, G96:G101, E104 – Enter the TANF Revenue by Cost Center. Take note of the shaded cells.
- Cells H64:H79, H83:H92, H96:H101, H104 – Enter the Title XX Revenue by Cost Center. Take note of the shaded cells
- Cells I64:I79, I83:I92, I96:I101, E104 – Enter the Title IV-B Revenue by Cost Center. Take note of the shaded cells.
- Cells J64:J79, J83:J92, J96:J101 – Other Funding Column. Make no entries into this column. It is reserved for future use.
- Cells K64:K79, K83:K92, K96:K101 – Enter any Medical Assistance Revenue received. Cell J104 will be populated with the results form the Title XIX section of the RMTS worksheet, so no entry is required in this cell.
- No entry is required for Columns L, M and N. These columns are calculated by the program. They are the result of subtracting all program income and Federal Revenues from the Total Reimbursable Expenses and multiplying the result by the appropriate participation rate for each cost center.

CY918 – Administrative Cost Pool Calculation Completion

- No entry required for Column C Eligible Expenses. This column is populated by the total of Wages, Benefits, Operating and fixed Asset Expense Columns of the CY370 Expenditures Report less Non-Reimbursable Non-PS/SUB expenditures..
- Adjustment Columns D164:J196. Expense items required to be deducted from the Eligible Expenses include:
- a. Co. Provided Services/ NON-recurring Adoption
 - b. Maintenance Expenditures

Invoice Completion Check Sheet (cont'd)

- a. Any expenses associated with maintaining a child in a placement setting including clothing, incidentals, etc.
 - c. Assets exceeding \$25,000
 - d. PROGRAM INCOME
 - a. Any Eligible Expenses reimbursed with Program Income,
 - e. TANF, TITLE XX, TITLE IV-B
 - a. Any Eligible Expenses reimbursed with TANF, Title XX, or Title IV-B
 - f. IL GRANT
 - a. Any Eligible Expenses reimbursed with Independent Living Grant Funds.
 - g. DIRECT Administrative CHARGES
 - a. Direct Administrative claims included in the Title IV-E PM claim (ex. Wages and benefits of staff performing Title IV-E eligible activities.
- No entry is required for Column K - Net Cost Pool. This column is populated with the results of subtracting all adjustments in columns D through J from the Eligible Expenses in column C by the program.
- No entry is required for Column L - Allocation of IV-E revenue. This column is populated with the resulting percentage of dividing each cost center's Net cost pool expenses by the total Net Cost Pool for all of the cost centers.
- No entry is required for Column M - IV-E Revenue from RMTS. This column is populated with the results of multiplying the RMTS total Admin and Training Revenue by the percentage in Column L Allocation of IV-E Revenue.
- Cells N164:N197 – Enter in these cells any IV-E revenue generated from claiming direct administrative Charges on the Title IV-E PM claim.

Direct Claim Worksheet

- Enter in Column R the position number for each OCYF approved position eligible for Direct administrative Claiming.
- Enter in Column S the STAFF NAME for each OCYF approved position eligible for Direct administrative Claiming.
- Enter in Column T the position or title for each OCYF approved position eligible for Direct administrative Claiming.
- Enter in Column U the program code (2-Eligibility Determinations or 5-Other Administration) associated with the each OCYF approved position eligible for Direct administrative Claiming.
- Enter in Column Z, W, X, and Y the wages, benefits, operating expense or fixed asset expense associated with the each OCYF approved position eligible for Direct administrative Claiming.

Invoice Completion Check Sheet (cont'd)

CY969 Dependent/Delinquent Summary

- No entry is required for this form. It is entirely generated by the program.

YTD Invoice Completion

CY370 – Expenditure Report – Ensure the YTD worksheet is active.

- Cells J9:J24 – Enter number of children served YTD with services provided by Agency Staff. These counts do not accumulate from the individual quarter worksheets since the number should reflect the unduplicated number of children served.
- Cell J26 – Enter the number of unduplicated children served YTD with ONLY Agency provided services.
- Cells K9:K24 – Enter number of children served YTD associated with the purchased services in cells G9:G24. These counts do not accumulate from the individual quarter worksheets since the number should reflect the unduplicated number of children served.

CY370A – Revenue Report

- No entry is required for this YTD report. All cells accumulate and total the individual quarters' reports.

CY348 – Fiscal Summary

- No entry is required for this YTD report. All cells accumulate and total the individual quarters' reports.

CY969 Dependent/Delinquent Summary

- No entry is required for this form. It is entirely generated by the program.

Printing the Report

Printing the individual quarter reports.

- Select "Tools" from the standard toolbar at the top of the page. Select "Macro" from the "Tools" menu, and select "Macros..." from the "Macro" menu.
- You will be directed to the Macro dialog box. There are 9 macros listed in the box.
- To print the individual 1st quarter reports select the macro "**prtQTR1**" from the dialog box and click on the "Run" button to the right of the list.
- This macro will initiate printing of the following **individual** quarter forms:
- CY370
 - CY370A
 - CY969
 - CY348
 - CY918
 - RMTS Worksheet

Invoice Completion Check Sheet (cont'd)

Printing the RMTS Worksheet and the CY918 – Administrative Cost Pool Calculation only

- Ensure the quarter you want to print is the active worksheet on the screen.
- Select "Tools" from the standard toolbar at the top of the page. Select "Macro" from the "Tools" menu, and select "Macros..." from the "Macro" menu.
- You will be directed to the Macro dialog box. There are 9 macros listed in the box.
- To print the 1st Quarter RMTS Worksheet and the CY918- Administrative Cost Pool Calculation, select the macro "RMTS1" from the dialog box and click on the "Run" button to the right of the list.
- This macro will initiate printing of the following **individual** quarter forms:
 - a. RMTS Worksheet
 - b. CY918
 - c. Direct Administrative Claim Worksheet

Note: The individual Quarter RMTS Worksheet and CY918 – Administrative Cost Pool must be printed and submitted along with the YTD reports.

Printing the YTD quarter reports

- Select "Tools" from the standard toolbar at the top of the page. Select "Macro" from the "Tools" menu, and select "Macros..." from the "Macro" menu.
- You will be directed to the Macro dialog box. There are 9 macros listed in the box.
- To print the YTD quarterly reports, select the macro "YTD" from the dialog box and click on the "Run" button to the right of the list.
- This macro will initiate printing of the following **YTD** forms:
 1. CY370
 2. CY370A
 3. CY969
 4. CY348

