

**REQUEST FOR REIMBURSEMENT (RFR)
TUTORIAL**

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- Edit Member Service Agreement
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Member Assistance Program

As an AmeriCorps Utah member, you have access to the Member Assistance Program. This provides **free, confidential, 24/7, unlimited telephonic counseling services and up to three face-to-face counseling sessions.**

No issue too big or small
call 1-800-451-1834 night or day!

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WELCOME, ELIZABETH!

Elizabeth Oliver is UServeUtah's new National Service Program Manager. Welcome to the team!

[MEET ELIZABETH!](#)

Report Technical Issues [More Details...](#)
Follow this link to report IPT technical issues.
IPT Technical Issues

Step 1: Log into IPT
Step 2: on your left hand column, click on "Grant Management"

[Home](#)[Service Site List](#)[Site Supervisor List](#)[Student List](#)[Group List](#)[Reports](#)[Contracts](#)

Contract List


Sub-Grant Number	Grant Year	Program	Contract Number	Status	Start Date	End Date
17AFHUT0010010	2019-2020	UWNU AmeriCorps Education Initiative of Utah (AEIOU)	17AFHUT001	Active	2019-08-01	2020-07-30

Intern Placement Tracking (c) 2000 - 2019 by Alcea Software LLC (102214)

Step 3: Click on your Sub-Grant Number

Contract

[Contracts](#)

Program UWNU AmeriCorps Education Initiative of Utah (AEIOU)
Prime Grant Title Formula Prime Grant
Prime Grant Number 17AFHUT001
Grant Year 2019-2020
Sub-Grant Number 17AFHUT0010010
Contract Number 20-0620
Contract Status 
Project Manager Saren Loosli
Program Area Education
Amounts Committed: 831,422.00 Expended: 0 Remaining: 831,422.00
Project Dates Start: 08-01-2019 End: 07-30-2020
Required Match Pct. 24
Budget Match Pct. 52
Vendor Codes 31312B
Finance Coding Block 1000/710/1165/WAE/7501/9PAFC17

Contract Budget

Budget Category	Budget Amount	Budget Spent	Balance	Match Amount	Match Spent	Match Balance
SECTION I. Program Operating Costs						
Personnel Expenses	158,564.00	0	158,564.00	0	0	0
Personnel Fringe Benefits	53,648.00	0	53,648.00	0	0	0
Staff Travel	12,280.00	0	12,280.00	0	0	0
Member Travel	17,580.00	0	17,580.00	0	0	0
Equipment	0	0	0	0	0	0
Supplies	3,575.00	0	3,575.00	37,200.00	0	37,200.00
Contractual And Consultant Services	12,000.00	0	12,000.00	0	0	0

On your current contract's home page, you will find your contract information which includes your contract's budget.

Contractual And Consultant Services	12,000.00	0	12,000.00	0	0	0
Staff Training	900.00	0	900.00	0	0	0
Member Training	6,650.00	0	6,650.00	0	0	0
Evaluation	0	0	0	0	0	0
Other Program Operating Costs	40,329.00	0	40,329.00	273,000.00	0	273,000.00
SECTION II. Member Costs						
Living Allowance	458,250.00	0	458,250.00	561,750.00	0	561,750.00
FICA for Members	35,114.00	0	35,114.00	42,916.00	0	42,916.00
Workers Compensation	4,095.00	0	4,095.00	0	0	0
Health Care	3,000.00	0	3,000.00	0	0	0
Other Member Costs	0	0	0	0	0	0
SECTION III. Administrative Costs						
Corporation Fixed Amounts	25,437.00	0	25,437.00	0	0	0
Commission Fixed Amount	0	0	0	0	0	0
Federally Approved Indirect Cost Rate	0	0	0	0	0	0
Totals	831,422.00	0	831,422.00	914,866.00	0	914,866.00

Budget Match: 52.39% Current Match: 0.00%

LastEdit: Id:64

Step 4: At the bottom of your contract's home page, click on "Add" to submit your reimbursement requests throughout the year. Your reimbursement requests will be listed here.

Reimbursement Requests [\(Add\)](#)

Request Number	Status	Submit Date
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Reimbursement Request

Status History:

Contract

Request Number

Period: Start: End:

Status

Contract Number

Vendor Code

Grant Year

Submitted Date

Approved Date

Paid Date

Notes:

Supporting Documentation:

Other Supporting Documentation:

Save

Budget Item	Expenses This Period	Prior Expenses	Total Expenses	Available Balance	Match Spent	Match Previous	Match Balance
SECTION I. Program Operating Costs							
Personnel Expenses	<input type="text" value="0"/>	0	0	158,564.00	<input type="text" value="0"/>	0	0
Personnel Fringe Benefits	<input type="text" value="0"/>	0	0	53,648.00	<input type="text" value="0"/>	0	0
Staff Travel	<input type="text" value="0"/>	0	0	12,280.00	<input type="text" value="0"/>	0	0
Member Travel	<input type="text" value="0"/>	0	0	17,580.00	<input type="text" value="0"/>	0	0
Equipment	<input type="text" value="0"/>	0	0	0	<input type="text" value="0"/>	0	0
Supplies	<input type="text" value="0"/>	0	0	3,575.00	<input type="text" value="0"/>	0	37,200.00
Contractual And Consultant Services	<input type="text" value="0"/>	0	0	12,000.00	<input type="text" value="0"/>	0	0
Staff Training	<input type="text" value="0"/>	0	0	900.00	<input type="text" value="0"/>	0	0
Member Training	<input type="text" value="0"/>	0	0	6,650.00	<input type="text" value="0"/>	0	0
Evaluation	<input type="text" value="0"/>	0	0	0	<input type="text" value="0"/>	0	0

Step 5: Fill in the appropriate fields on this page.

Identify the request (in the "Request Number" block) by the date(s) of the reimbursement period. For example, if the request period is Jan 2023 - Mar 2023, please label the request as such. If you are submitting requests on a monthly basis, please list the month and year of the request, i.e. Jan 2023.

Period: Fill in the start and end date of the request period.

Expenses This Period column: These numbers should align with your workbook reconciliation ledger.

Other Program Operating Costs	<input type="text" value="0"/>	0	0	40,329.00	<input type="text" value="0"/>	0	273,000.00
SECTION II. Member Costs							
Living Allowance	<input type="text" value="0"/>	0	0	458,250.00	<input type="text" value="0"/>	0	561,750.00
FICA for Members	<input type="text" value="0"/>	0	0	35,114.00	<input type="text" value="0"/>	0	42,916.00
Workers Compensation	<input type="text" value="0"/>	0	0	4,095.00	<input type="text" value="0"/>	0	0
Health Care	<input type="text" value="0"/>	0	0	3,000.00	<input type="text" value="0"/>	0	0
Other Member Costs	<input type="text" value="0"/>	0	0	0	<input type="text" value="0"/>	0	0
SECTION III. Administrative Costs							
Corporation Fixed Amounts	<input type="text" value="0"/>	0	0	25,437.00	<input type="text" value="0"/>	0	0
Commission Fixed Amount	<input type="text" value="0"/>	0	0	0	<input type="text" value="0"/>	0	0
Federally Approved Indirect Cost Rate	<input type="text" value="0"/>	0	0	0	<input type="text" value="0"/>	0	0
Grand Totals	0	0	0	831,422.00	0	0	0

Required Match: 52.39% Current Match: 0.00%



LastEdit: Id:0

Step 6: Click “Save” once you’ve completed filling out your reimbursement request, and certify that funds requested are in accordance with the term and conditions in your contract by signing your name at the bottom.

Step 7: Send the UServeUtah Financial Specialist an email to alert them of your submission as IPT does not notify UServeUtah of submissions.

Required Match: 64.76% Current Match: 50.94%

Mentoring Through AmeriCorps (MFS) has submitted a request for reimbursement under contract number 190692 in the amount of \$283,212.00. I certify that the funds requested by this claim were expended in accordance with the terms and conditions in the contract.

Signed: Laurie Maddock (login: Laurie Maddock (MFS)) 07-19-2019

Example

LastEdit: Id:154

[Contract](#)

Reimbursement Request

Request Number
 Period: Start: End:
 Status
 Contract Number
 Vendor Code 01234567
 Grant Year 2018-2019
 Submitted Date
 Approved Date
 Paid Date

Status History:
 Reviewed 10-24-18 Greg Bates
 Approved 10-24-18 Greg Bates
 Paid 10-24-18 Greg Bates

Notes:

Supporting Documentation: [View](#)

Other Supporting Documentation:

Commission Supporting Documentation: [View](#)

Budget Item	Expenses This Period	Prior Expenses	Total Expenses	Available Balance	Match Spent	Match Previous	Match Balance
SECTION I. Program Operating Costs							
Personnel Expenses	<input type="text" value="100.00"/>	0	100.00	39,900.00	<input type="text" value="0"/>	0	1,000.00
Personnel Fringe Benefits	<input type="text" value="0"/>	0	0	10,000.00	<input type="text" value="0"/>	0	100.00
Staff Travel	<input type="text" value="0"/>	0	0	10,000.00	<input type="text" value="0"/>	0	100.00
Member Travel	<input type="text" value="0"/>	0	0	5,000.00	<input type="text" value="0"/>	0	100.00
Equipment	<input type="text" value="0"/>	0	0	0	<input type="text" value="0"/>	0	0
Supplies	<input type="text" value="0"/>	0	0	5,000.00	<input type="text" value="0"/>	0	100.00
Contractual And Consultant Services	<input type="text" value="0"/>	0	0	0	<input type="text" value="0"/>	0	0

Here's an example of an approved reimbursement request. This will tell you who reviewed it, approved it, and when it was paid.