Progress Report Form

Project Title:
Grant Agreement No.:
Grantee or Fiscal Sponsor:
Contact Name and Phone No.:

TOTAL GRANT AMOUNT:
GRANT AMOUNT REQUESTED:
(A progress payment will never exceed 75% of the grant amount and is subject to meeting the matching requirements for the project)
CASH MATCH:
OVERALL MATCH (CASH & IN-KIND):
TOTAL PROJECT COST:
PERCENT CASH MATCH:
PERCENT OVERALL MATCH:

Reimbursement payments can be made upon completion and submission of the following items as ONE PDF by email to your project's assigned Grants Officer:

1) Grantee wire transfer instructions on bank letterhead, including an issue date within one year of the payment date
2) A description of work completed and the project components implemented to date and still outstanding
3) Approved Project Budget
4) Actual Expense Worksheet, signed by finance department or accounting staff of grantee (fiscal agent)
5) Documentation of expenses (contracts, invoices, purchase orders, payroll summaries, etc.) and donated services (materials, equipment, etc.) for all expenditures (cash or in-kind) over $5,000.00

Further instructions can be found on page 2.

Please read the following statements, sign and date below to verify their accuracy.

1) The grantee is in compliance with the terms and conditions of the GOCO Grant Agreement.
2) All project documentation is true and accurate reflecting only those eligible costs incurred as described in the project application. The grantee or fiscal sponsor certifies that it has on file invoices, receipts, contracts, and/or proof of payment for the costs incurred and will maintain those records for inspection by GOCO or GOCO's auditors for a period of five years, in accordance with the GOCO Grant Agreement.

Signature: _____ Date: _____
(signature must be from the grant's fiscal agent)

Printed Name: _____ Organization: _____

Reimbursement Request Instructions

1. **WIRE TRANSFER INSTRUCTIONS** All grant reimbursements will be sent to you via wire transfer. Your banking institution's transfer instructions must contain an issue date within one year of the payment date, the bank name, account name, physical address (not PO Box), account number, routing number, bank contact person, their contact information and signature, and any additional instructions. Your internal instructions or voided checks will not be accepted.

2. **PROJECT DESCRIPTION** Describe the components of the project that have been completed to date, whether or how they differ from those proposed in the application, and any update on the overall project timeline.

3. **APPROVED PROJECT BUDGET** Submit a copy of the budget that was included with the signed grant agreement or approved project modification (if applicable).

4. **ACTUAL EXPENSE WORKSHEET (AEW)** The AEW is a financial breakdown of your actual expenses to date and assists GOCO staff in locating corresponding financial documentation within your report. The actual expense worksheet should include all expenses for the full length of the project.

   The Actual Expense Worksheet must:

   - Be presented in the template provided by GOCO. It is available at www.goco.org
   - Track invoices in the order presented in the report
   - Account for every GOCO-eligible cost (including cash and in-kind match) associated with the project even though invoices for expenditures less than $5,000 will not be submitted
   - Be signed by a representative of the fiscal agent's finance department

   Description of Actual Expense Worksheet Columns:

   - **Invoice Date:** Include the invoice date or date range of when the expense or donated service was incurred
   - **Invoice Code**: Only required for expenses over $5,000.00. Include a label that corresponds to the labeled invoices/receipts and in-kind statements provided in the report. Organize all required backup support in the same order as presented on the worksheet.
   - **Vendor or Service Category**: Include the provider name as it appears on the invoice/receipt or brief description of the expense or in-kind service
   - **GOCO Cash**: Indicate the amount of that invoice/receipt that will be paid for by your GOCO grant. This column should never exceed the grant amount
   - **Grantee Cash Match**: Indicate the amount of that invoice paid for by the grantee (fiscal agent)
   - **Grantee In-kind Match**: Indicate the amount of in-kind match provided by the grantee (fiscal agent)
   - **Partner Cash Match:** Indicate the amount of that statement to be paid for by sources other than the grantee
   - **Partner In-kind Match**: Indicate the amount of in-kind match provided by sources other than the grantee
   - **Total:** Indicate the total amount of the invoice/receipt

5. **DOCUMENTATION OF EXPENSES** GOCO will examine these documents to ensure they are consistent with the approved Project Budget. Please be aware that GOCO may need to follow-up with you to get additional explanation of expenses or may require submission of additional documentation.

   Enclose copies of invoices or other form of backup support for all cash expenditures and in-kind contributions valued over $5,000.00. Do not submit documentation for expenses less than $5,000. It is necessary that all backup support is labeled to correspond with the "Invoice Code" category on the AEW. Please include project-related expenses only. You must identify project expenses from non-project expenses when an invoice incorporates both. Copies of checks does not constitute invoice documentation.