

REQUESTING WORKING CAPITAL for CAP Grant(s)

How to Invoice DEP's Chesapeake Bay Office

What is Working Capital?

Funds that grantees can request from DEP's Chesapeake Bay Office (CBO) prior to engaging in work under their CAP Implementation grant. CAP grant recipients may request 25% of each year's award to get started on grant-related work. These funds must be deposited into an interest-bearing account and proof of expenditures must be provided. Below is an example breakdown of payment for a \$100,000 grant award where the grantee received \$25,000 of working capital::

100%	Total Award	\$ 100,000	This is the amount in your Grant Agreement.
25%	Working Capital (Advance)	\$ 25,000	<ul style="list-style-type: none"> 25% of the award which has been provided as an advance. Provided without proof of costs incurred and is to be used for purposes set forth within your scope of work. Invoices submitted after 60% of funds have been paid to grantee will be used to provide proof of costs incurred for these funds.
60%	Paid Reimbursements	\$ 60,000	<ul style="list-style-type: none"> The next 60% of the grant award will be reimbursed completely through regular reimbursement requests.
25% + 60% 85%	Working Capital + Paid Reimbursements Total	\$25,000 + \$60,000 \$ 85,000	Grantee has received \$85,000 total <ul style="list-style-type: none"> \$60,000 through paid invoices with proof of costs incurred \$25,000 of working capital up front with no proof of costs incurred
25%	Repay Working Capital	\$ (25,000)	<ul style="list-style-type: none"> We collect the next 25% in reimbursement requests as "back up" or proof of costs incurred for the initial working capital you received. It will not be reimbursed but deducted from the "balance of working capital" until that balance is \$0.
15%	Held for final report	\$ 15,000	Final 15% of award may be retained until submission of final report. <ul style="list-style-type: none"> Grantee provides bank statement showing interest earned. Any interest earned is deducted from the final reimbursement amount.
	Total Paid:	\$ 100,000	The total amount paid to the grantee equals the total award.

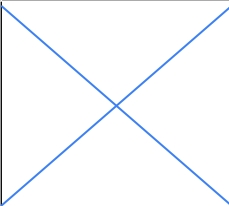
Questions? Contact Us at RA-EPCAPGRANTS@pa.gov

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How do I to calculate the “Balance of Working Capital Before this Invoice” portion of the Reimbursement Request Form?

Below is an example of how to figure out the “Balance of Working Capital Before this Invoice” for a \$100,000 grant award where the grantee received 25% working capital. In this example, the grantee is invoicing \$25,000 each quarter:

Form(s) Submitted to DEP	Amount Requested	Amount Grantee Receives	Cumulative Total Requested Reimbursements	Balance of Working Capital before this Invoice	Balance of Working Capital After Invoice	Explanation:
Grantee Working Capital Request	\$25,000	\$25,000		\$25,000	\$25,000	<ul style="list-style-type: none"> If requested, 25% of each year's award provided as working capital. Advance provided without proof of costs incurred. To be used for purposes set forth within your scope of work
Reimbursement Request 1	\$25,000	\$25,000	\$25,000	\$25,000	\$25,000	Reimbursement Request will be fully reimbursed.
Reimbursement Request 2	\$25,000	\$25,000	\$50,000	\$25,000	\$25,000	Reimbursement Request will be fully reimbursed.
Reimbursement Request 3	\$25,000	\$10,000	\$75,000	\$25,000	\$10,000	<p>Now that greater than 60% is requested in reimbursements, Reimbursement Request will not be fully reimbursed.</p> <ul style="list-style-type: none"> \$15,000 in invoices applied to the working capital balance. \$10,000 is reimbursed. The balance of working capital is now \$10,000.
Reimbursement Request 4 Final*	\$25,000	\$0 – Final Report not provided. \$15,000 - Final Report provided.	\$100,000	\$10,000*	\$0	<p>Reimbursement Request will not be fully reimbursed.</p> <ul style="list-style-type: none"> \$10,000 in invoices applied to the remainder of working capital and that balance is now zero. If a final report is provided, the final 15% is reimbursed (\$15,000) If a final report is not provided, \$0 is reimbursed and 15% is withheld until the final report is provided.
Final Report		\$15,000		\$0	\$0	Upon submission and approval of a final report, DEP will authorize payment of the final 15% and reduce by any interest earned on working capital, if applicable.

*For the Final Reimbursement Request, provide a bank statement and include any interest earned on the Working Capital in “Balance of Working Capital before this invoice”, if applicable.

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What amounts on the REIMBURSEMENT REQUEST form are affected when you have requested Working Capital?

Invoice Amount:

amount you are requesting to be reimbursed. This is the same as the "Total Grant Expenditures for this period".

Total Grant Expenditures for the period:


amount you are requesting to be reimbursed. This is the same as the "Invoice Amount"

If you received Working Capital, the remaining balance "before this invoice" must be entered here.

See the previous two pages for tips on how to track working capital and calculate what to put in this part of the form.

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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
GRANTS CENTER



Invoice Date: _____
Invoice No.: _____
Invoice Amount: _____

REIMBURSEMENT REQUEST

Grant Program: ☐ CCWAPC/CAP Implementation Grant ☐ Phase 2 CBAIP Pilot

(This section completed by Grantee)

Project Title: _____
Document #: _____ Vendor #: _____
Payable To (Grantee): _____
Point of Contact: _____ Phone Number: _____
Partner Bank Type (e.g. BN01, BN02, etc.): _____
Invoice Period (Month, Day, Year): _____ to _____

EXPENDITURES:

Total Grant Expenditures for this period: \$ _____

Balance of Working Capital Before this Invoice: \$ _____
% Funds Expended (DEP Grants Center Will Complete): _____ %

AMOUNT OF REIMBURSEMENT: \$ _____

All related backup to this invoice is stored in the electronic ESA file for audit purposes.

GRANTEE SIGNATURE:
I declare the above to be a true and accurate statement.

Signature Title Date

(This section to be completed by DEP Staff)

Approved by: _____ Recommended Payment: \$ _____
Title: DEP Grants Center Management Staff Recommended by: _____
Date Approved: _____ Date Recommended: _____

Amount of Reimbursement: amount you will be reimbursed, less any Working Capital or interest, if applicable.

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