

## **Instructions for Completing Request for Federal Funds Form (DPR 417)**

### General Notes

- All requests for reimbursement must be accompanied by copies of receipts, invoices, cancelled checks, timesheets, etc., in order to be reimbursed.
- Do not handwrite entries other than signatures and corresponding dates.
- Leave all lines blank for which there are no entries.
- Round off all amounts to the nearest whole dollar.
- Reimbursement requests must show sufficient match in order to be paid.
- Amounts requested must not substantially differ from amounts listed in the approved budget in the project agreement.

### Item Number

1. Item 1 has already been completed—the federal agency is the National Park Service
2. Check the appropriate line as to whether the request for funds is a partial request or a final request. If the request is final, the amount billed should represent the final cost of the project minus any previous partial payments requested.
3. Because advance payment requests must be approved in advance by the National Park Service, the form has been marked as a Reimbursement. Contact the Office of Historic Preservation to obtain information about how to obtain such approval. Advance payments will only be approved if grant recipient shows that those costs are necessary at that time for successful completion of the project.
4. Enter the number of this request in relation to the grant award—e.g., for the first payment request, enter 1; for the second, enter 2; etc.
5. The grant recipient's State of California supplier number should have already been completed. If this box is blank on your form, contact the Office of Historic Preservation's Fiscal and Grants Coordinator.
6. The grant recipient's contract number should have already been completed. If this box is blank on your form, contact the Office of Historic Preservation's Fiscal and Grants Coordinator.
7. The grant agreement beginning and end dates should have already been completed. If you are requesting a partial payment, change the dates to indicate the grant period covered by your request.

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8. The grant recipient's name has already been completed. Please add complete mailing address of the organization receiving the grant.
9. The grant amount should have already been completed. If this box is blank, add the full grant amount.
10. The federal grant number should have already been completed. If this box is blank on your form, contact the Office of Historic Preservation's Fiscal and Grants Coordinator.
11. Enter the total amount of match expenditures from all previously submitted funding requests, if any.
12. Enter the total amount requested from all previously submitted funding requests, if any.

### Cost Categories Table

- Column A: This column is for all cash expenditures made since the last funding request submitted for which reimbursement is being requested. Documentation showing that grantee expended all funds being requested for reimbursement must be attached/included.
- Column B: This column is for all cash expenditures made since the last funding request submitted that are being used as match for the grant funding being requested. Documentation showing that grantee expended all funds being used as match in this column must be attached/included.
- Column C: This column is for all non-cash expenditures made since the last funding request submitted. Non-cash expenditures may only be considered match and will not be reimbursed. Examples of non-cash expenditures that may be used as match include volunteer time, donated materials and supplies, etc. Documentation showing value of non-cash expenditures must be attached/included.
- Column D: Column D is formatted to automatically complete after Columns A, B, and/or C have been completed for each row.
- Line a: Enter the cash amount expended on the salaries of employees of the participating organization. Do not include fringe benefits or indirect costs on this line. Attach/include documentation showing time worked and amounts paid. Include a summary sheet, listing amounts paid, that corresponds to the total shown for this line.
- Line b: Enter the amount expended for volunteers. Volunteers' hourly rates must be based on experience and work performed. Use Column A only for actual cash expenditures made for volunteers. Use Column B for volunteer labor.

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Attach/include documentation showing volunteer hours (see Sample Volunteer or Donated Labor Timesheet). Attach/include documentation showing any cash expenditures made for volunteers.

- Line c: Enter the amount expended on fringe benefits for employees of the participating organization. Attach/include documentation showing amounts expended and include a summary sheet, listing amounts paid, that corresponds to the total shown for this line.
- Line d: Enter the cost of transportation, lodging, meals, per diem, and other related travel costs. Attach/include documentation showing all expenditures and include a summary sheet, listing amounts paid, that corresponds to the total shown for this line.
- Line e: Enter the cost of equipment acquisition or rental, and office space rental, if applicable. Attach/include documentation showing all expenditures made for such purposes.
- Line f: Enter the cost of supplies. Attach/include receipts/paid invoices for all supplies and include a summary sheet, listing amounts paid, that corresponds to the total shown for this line. For receipts, include a short note on the summary sheet explaining what the purchased item was used for.
- Line g: Enter the cost of professional service contracts, consultants, and closed-end contracts (e.g., historian, architectural historian, architect, etc.). If the contract includes other costs (e.g., printing, photocopying, research), include these costs on this line. Attach/include documentation (invoices, cancelled checks, etc.) showing all expenditures made for professional service contracts and a summary sheet, listing amounts paid, that corresponds to the total shown for this line.
- Line h: Enter the costs of other contracted services such as photocopying, printing, etc. Attach/include documentation for all costs and a summary sheet, listing amounts paid, that corresponds to the total shown for this line.
- Line i: Enter Participating Organization's indirect/overhead costs based on an approved Federal Agreement. Attach/include Federal Agreement showing approved indirect rate. Attach/include documentation showing basis for indirect charges and a summary sheet, listing amounts paid, that corresponds to the total shown for this line.
- Line j: Line j will automatically be completed based on entries in lines a through i.
- Line k: Some programs require that income collected from the project be subtracted from cash expenditures—this is to be considered profit. If that is the case, list program income here and attach documentation for all income being claimed. This applies to Column A only.
- Line l: Line l will automatically be completed based on lines j and k.

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- Line m: The percentage of federal share allowed for the applicable grant program should have already been completed. It will be used to automatically complete Column D, Line m based on the total in Column D, Line l.
- Line n: Line n will automatically populate with either the amount in Column A, Line l or Column D, Line m, whichever is lower. This amount, when added to the amount listed in item number 12 above, cannot exceed the amount in item number 9 above (in other words, the total amount requested cannot exceed the amount of the grant). If it does, reduce the amount on Line n accordingly.

### Bottom of Form

In the space provided below Line n, indicate who the check should be made payable to, to whose attention it should be addressed, and where it should be mailed.

In the Certification section, provide the signatures and signature dates of the person who signed the project agreement and the participating organization's accounting officer, if there is one. (Note: Two signatures are not required, but the Participant's Project Representative must sign and date the form.)

### Submitting the Form

Submit completed and signed form with backup documentation by email to [daniel.arismendi@parks.ca.gov](mailto:daniel.arismendi@parks.ca.gov).

If you are unsure about how to complete the form, you can email an unsigned draft to Daniel Arismendi at [daniel.arismendi@parks.ca.gov](mailto:daniel.arismendi@parks.ca.gov) for review before you finalize and sign it.

Questions about completing the form or submitting backup documentation should be directed to Office of Historic Preservation Fiscal and Grants Coordinator, (916) 382-0730.