

# **Hourly Wage Reimbursement Guide**

A how-to for requesting grant award payments for hourly wages from the Minnesota Department of Agriculture.

### How do I collect the award for MDA Grants?

### **Step 1: Collect the required documentation**

The MDA requires two types of proof for hourly wage reimbursement:

- 1. Proof of PURCHASE
- 2. Proof of PAYMENT

#### 1. Proof of Purchase

Used to identify **WHO** worked and **WHEN**. Acceptable documents include:

- · Detailed timesheets
- Payroll documentation

### **Requirements:**

- Timesheets must include the specific days and hours worked. We cannot accept a timesheet that only lists the total number of hours worked.
- If there are timesheet hours worked that are not applicable to the grant project, include them in the "total paid" but not the "total eligible cost" column of the Reimbursement Worksheet.
- Time worked must occur within the dates listed on your grant contract, and prior to the payment date.

### 2. Proof of Payment

Used to identify **HOW** and **WHEN** payment for time was made. Acceptable documents include:

- Cleared checks, often available from an online bank account
- Direct deposit documentation
- Bank statements

### **Requirements:**

- Information provided on Proofs of Purchase (i.e., names, amounts, and dates) must match information shown on Proofs of Payment.
- Checks must be cleared by your bank or credit union (carbon copies of checks will not be sufficient).
- Cover or remove any sensitive information before making copies of your documents (i.e., account or routing numbers).

## Step 2: Fill out the Reimbursement Worksheet

The <u>Reimbursement Worksheet</u> is a summary of all of the documents you are submitting. The MDA may deny payment until you have completed the worksheet, especially if there are a large number of documents. The following information should be provided on the worksheet:

#### For Proof of Purchase:

- Type of proof Either detailed timesheets or payroll documentation
- Description of purchase Briefly describe how the time worked relates to the grant project
- Vendor name Name of the business or individual providing the services
- Date of purchase –Date of payment (check date) cannot occur before purchase (work dates)
- Total eligible cost Amount paid for grant project work (exclude non-applicable time)

#### For Proof of Payment:

- Type of proof Bank statement, cleared check, zero-balance invoice that includes payment date(s), zero-balance receipt that includes payment date, or credit card statement
- Total paid Total amount paid, including both eligible and non-eligible hours

### Step 3: Submit your documents to the MDA

Once you have collected and organized your documentation, send everything to the administrator for your grant. You can submit via mail or email; using email is preferred. For submissions by mail, use the address below and fill in the name of the grant administrator. Questions can be directed to the MDA Grants Line at 651-201-6500.

Attn: (NAME OF GRANT ADMINISTRATOR) Minnesota Department of Agriculture Ag Marketing and Development Division 625 Robert St N St. Paul MN 55155-2538

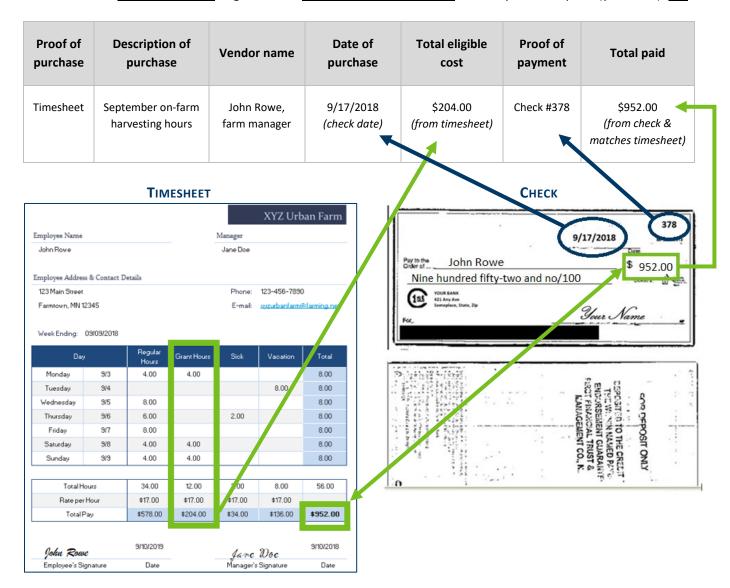
## **Example Submission for Reimbursement**

**Reimbursement worksheet**: In this example, the grantee is requesting reimbursement for hourly wages using a timesheet as proof of purchase and a check as proof of payment.

**Proof of purchase**: The timesheet includes the name of the employee (vendor name), the dates of relevant work (prior to the date of purchase), and hourly rate per day of work. Grant hours are separated out as eligible costs to be listed on the worksheet, and the full paycheck amount is the total paid on the worksheet.

**Proof of payment**: The check confirms the name of the employee and the total amount paid, matching the timesheet. Private personal information on the check is blacked out, and the payment date (date of purchase) was made after the work was completed.

Grantee Name: Jane Doe Organization: XYZ Urban Farm Final Payment Request (yes or no): No



# **Reimbursement Worksheet**

Name:	Organization:	Final Payment Request (yes or no):

Proof of purchase	Description of purchase	Vendor name	Date of purchase	Total eligible cost	Proof of payment	Total paid