



On the 
T.R.A.I.L. to



Diabetes Prevention

Budget Development

Welcome!

2018-2019

On the T.R.A.I.L.

(Together Raising Awareness for Indian Life)

to Diabetes Prevention Program

Webinar Information

- Partner information
- New award/budgeting information
- Creating a Budget
- Uploading Documents
- Helpful Tips

National Partners

U.S. HHS



IHS



NCAI



BGCA



FirstPic, Inc.



Key Staff



National
Congress of
American
Indians

Natasha Anderson, Native Youth Strategy Coordinator

Kurt Sodee, Director of Finance

Training & Technical Assistance Provider



Kelly Baird, Project Director

Robin Paterson, Project Manager (Compliance)

Abrahm Neuser, Senior Project Coordinator (Program)

David Cook, Senior Project Coordinator (Finance)

Aji Bakare, Project Assistant (Finance)

Matt Bieler, Project Assistant (Finance)

New Information

2018-2019

T.R.A.I.L.

**Creating and Entering the Budget
into the Online Reporting Site**



To access this page, you have to log in to TRAIL.

Username

example@example.xyz

Password

Log In

Remember me

[Forgot Your Password?](#)



HELLO EXAMPLE PERSON.

Incomplete Sub-Grants

Sub-Grant Name	Status	Last Modified
NCAI-00-000-AA-ZZ		3/16/2018 7:46 AM

Incomplete Reimbursements

No Reimbursements Found

Incomplete Progress Reports

Report Name	Site	Status	Submitted Date
ETS Q2 Progress Report	Example TRAIL Site	Not Started	

Incomplete PA Logs

Report Title	Site	Month	Year	Status
January 2018 PA Logs	Example TRAIL Site	January	2018	Not Started



HELLO EXAMPLE PERSON.

Incomplete Sub-Grants

Sub-Grant Name	Status	Last Modified
NCAI-00-000-AA-ZZ		3/16/2018 7:46 AM

Incomplete Progress Reports

Report Name	Site	Status	Submitted Date
ETS Q2 Progress Report	Example TRAIL Site	Not Started	

Sub-Grants

Incomplete Reimbursements

No Reimbursements Found

Incomplete PA Logs

Report Title	Site	Month	Year	Status
January 2018 PA Logs	Example TRAIL Site	January	2018	Not Started

To enter a budget, select "Sub-grants" from the Grants dropdown.



SUB-GRANTS

Grant: NCAI-00-000-AA-ZZ Sub-Grant Name:

Status: View All Sort By: Name

View All

Sub-Grant Name	Awarded	Total Budgeted	Requested Amount	Approved Amount	Balance	Status
NCAI-00-000-AA-ZZ	\$18,000.00	\$0.00	\$0.00	\$0.00	\$18,000.00	

1 - 1 of 1

Click on the sub-grant related to the budget you are creating. The Sub-Grant Name for the 2018-19 program year will start with **NCAI-18**.

NCAI-00-000-AA-ZZ

TOTAL AWARDED: \$18,000.00

Organization: BGC of Example Land Date Range: 09/01/20
Total Budgeted: \$0.00 Requested Amount: \$0.00

Status: [Update Budget](#)
Balance: \$0.00

Click "Update Budget" to begin the budget submission process.

Personnel

Title	Hourly/Salary	Rate/Salary	Wks on Grant	% on Grant	Amount Allocated	Requested Amount	Approved Amount	Balance	Notes
-------	---------------	-------------	--------------	------------	------------------	------------------	-----------------	---------	-------

Fringe Benefits

Personnel & Fringe Notes

Reviewer Notes:
No Notes from National

Total Personnel and Fringe Budget: \$ 0.00

Expenses

Expense Notes



NCAI-00-000-AA-ZZ

TOTAL AWARDED: \$18,000.00

Personnel

Mark Inactive

Delete

Title	Hourly/Salary Rate/Salary	Total Hrs/Wk	Grant Hrs/Wk	Wks on Grant	% on Grant	Amount Allocated	Notes
-------	---------------------------	--------------	--------------	--------------	------------	------------------	-------

Fringe Benefits

Update Amounts

Add Personnel

Delete

Add

Update Amounts

To add a new staff line item, click the "Add" button in the "Add Personnel" box.

Personnel & Fringe Notes

Reviewer Notes:



NCAI-00-000-AA-ZZ

TOTAL AWARDED: \$18,000.00

Enter the employee title (not their name).
 This should be short but descriptive of their
 role with the program.
 Ex: Program Coordinator, Program Aide, etc.

Mark Inactive Delete

Wk Wks on Grant % on Grant Amount Allocated Notes

Update Amounts

Please Note: Administrative/finance staff/etc. who are indirectly assisting with fulfilling program requirements (e.g., Accountant, CEO, etc.) cannot charge more than 10% of their time to the T.R.A.I.L. program

Add Personnel

1 Title

Hourly/Salary Salary Rate/Annual Salary

2 Medical FICA Workers Comp %

3 Division

For **hourly** employees, enter their *hourly rate*.

For **salary** employees, enter their *annual salary*.

Select whether the employee is hourly or salaried.

% Time on Grant

Amount Allocated to Grant

Notes

Life Other

Benefits Allocated to Grant

Add Update Amounts



Update Amounts

Enter the total number of hours that the employee works per week.

Add Personnel

Delete

Title	Hourly/Salary	Rate/Annual Salary	Total Hrs/Wk	Grant Hrs/Wk	# Weeks on Grant	% Time on Grant	Amount Allocated to Grant	Notes
<input type="checkbox"/>	<input type="text"/>	Salary	<input type="text"/>	<input type="text"/>	<input type="text" value="47.29"/>			+
<input type="checkbox"/> Medical	<input type="checkbox"/> Dental	<input type="checkbox"/> Vision	<input type="checkbox"/> Short Term	<input type="checkbox"/> Long Term	<input type="checkbox"/> Life	<input type="checkbox"/> Other		
<input type="checkbox"/> FICA	<input type="checkbox"/> SUTA	<input type="checkbox"/> Workers Comp	<input type="checkbox"/> Retirement	<input type="checkbox"/> Other	Benefits Allocated to Grant			
<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %				

1

2

3

Enter the number of hours the employee works on the program each week.

Enter the number of weeks the employee will work on the program. It will default to the grant length, but can be changed.

Please Note: Not all employees will be working on the program for the entire grant year. Therefore, when adding a new employee, the “# Weeks on Grant” should accurately reflect what is appropriate for each staff member.

Reviewer Notes:
No Notes from National



On the top line of the fringe benefits, enter the **annual premium** for benefits paid as a set rate.

Example: Employer pays \$500 per month towards the Medical Insurance for this employee: \$500 x 12 mos. = \$6,000 annual premium (enter 6,000 in the Medical box)

Title	Hourly/Salary	Rate/Annual Salary	Total Hrs/Wk	Grant Hrs/Wk	# Weeks on Grant	% Time on Grant	Amount Allocated to Grant	Notes
<input type="checkbox"/>	<input type="text" value="Salary"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="47.29"/>			<input type="text"/>
<input type="checkbox"/> Medical	<input type="checkbox"/> Dental	<input type="checkbox"/> Vision	<input type="checkbox"/> Short Term	<input type="checkbox"/> Long Term	<input type="checkbox"/> Life	<input type="checkbox"/> Other		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
<input type="text"/> FICA	<input type="text"/> SUTA	<input type="text"/> Workers Comp	<input type="text"/> Retirement	<input type="text"/> Other	Benefits Allocated to Grant			
<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %				

1

2

On the bottom line of fringe benefits, enter the percentage based fringe amount (e.g., FICA = 7.65)

The system will automatically calculate the amount allocated to the grant based on information entered in the payroll section and here.

Please Note: You are not required to include fringe benefits in your budget, you may leave all or any of these options blank.



Click on the + under Notes to add the narrative information for each staff member. These notes are for both the personnel and fringe benefits entries. Notes included for each line item should describe the work the employee will be doing related to the T.R.A.I.L. program as well as any other relevant/clarifying information that may be needed.

Please note: If entering an amount for “Other” in the fringe benefits section, you do need to provide information specifically identifying this fringe benefit.

Delete

Amount Allocated to Grant Notes



<input type="checkbox"/> ? Medical	<input type="checkbox"/> Dental	<input type="checkbox"/> Vision	<input type="checkbox"/> Short Term	<input type="checkbox"/> Long Term	<input type="checkbox"/> Life	<input type="checkbox"/> Other
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
FICA	SUTA	Workers Comp	Retirement	Other	Benefits Allocated to Grant	
<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %		

Add Update Amounts

Supporting documentation verifying fringe rate(s) must be uploaded to the budget for percentage based fringe, with the exception of FICA.
(ex: Worker’s Compensation, SUTA, etc.)

Reviewer Notes:
No Notes from National



NCAI-00-000-AA-ZZ

TOTAL AWARDED: \$18

Personnel

Mark Inactive

Title	Hourly/Salary	Rate/Salary	Total Hrs/Wk	Grant Hrs/Wk	Wks on Grant	% on Grant	Amount Allocated
-------	---------------	-------------	--------------	--------------	--------------	------------	------------------

Fringe Benefits

Update Amounts

Add Personnel

Title	Hourly/S	Amount Allocated to Grant
<input type="checkbox"/> Program Coordin:	Hourly	\$8,840.00

Medical

FICA
7.650 % \$676

Add Update Amounts

Notes for Program Coordinator

No Notes from National

Save and Close

When adding notes, this is the pop up that will appear. Please enter the necessary narrative information and press "Save and Close" to close the screen and return to the budget entry page.



Update Amounts

Add Personnel

Delete

Title	Hourly/Salary	Rate/Annual Salary	Total Hrs/Wk	Grant Hrs/Wk	# Weeks on Grant	% Time on Grant	Amount Allocated to Grant	Notes
<input checked="" type="checkbox"/> <input type="text"/>	Salary ▾	<input type="text"/>	<input type="text"/>	<input type="text"/>	47.29			+
<input type="checkbox"/> Medical	<input type="checkbox"/> Dental							
<input type="checkbox"/> FICA %	<input type="checkbox"/> SUTA							
								Other <input type="text"/>
								Benefits Allocated to Grant

Do not leave any empty items in the Add box. The system will try to save it for you and it will show up as an line item with a random string of numbers and letters as its title in your budget. Select these empty line items in the Add box and hit delete **before** saving or moving forward.

Personnel & Fringe Notes

Reviewer Notes:
No Notes from National



7.65% \$49.53 % % % % \$49.53

Title
Program
Coordinator

Medical

Dental

FICA
7.65%
\$676.26

SUTA
0.20% \$

Update Amounts

Add Personnel

Add Update Amounts

Personnel & Fringe Notes

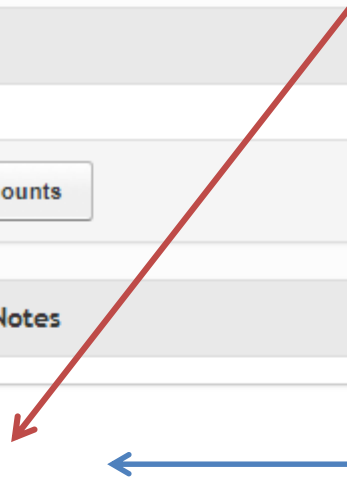
Reviewer Notes:
No Notes from National

Update Amounts Save Next

Total Personnel and Fringe Budget: \$ 11,862.61
Total Expense Budget: \$ 6,137.39
Total Budget Amount: \$ 18,000.00

1
Please indicate here the **number of youth**, as well as the **number of sites** within your organization, this proposed budget is based on.
If you are budgeting for something different than what was included in your award letter (# of youth, # of sites, and/or award amount), you will need to include detailed information here justifying the proposed changes.

2
This notes section is also utilized when submitting a request for a budget revision after your budget has been approved.





	<input type="text" value="7.65"/> % \$49.53	<input type="text" value=""/> %	<input type="text" value=""/> %	<input type="text" value=""/> %	<input type="text" value=""/> %	<input type="text" value=""/> %	<input type="text" value=""/> %	\$49.53
Title	Medical	Dental	Vision	Short Term	Long Term	Life	Other	
Program	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Coordinator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	FICA	SUTA	Workers Comp	Retirement	Other	Benefits Allocated to Grant		
	<input type="text" value="7.65"/> % \$676.26	<input type="text" value="0.20"/> % \$17.68	<input type="text" value="0.20"/> % \$17.68	<input type="text" value="0.20"/> % \$17.68	<input type="text" value="0.20"/> % \$17.68			\$746.98

Add Personnel

Notes from reviewers will appear here. These might include revisions needed if the budget is sent back for adjustment or corrections.
During your original budget entry, this will be blank.

Personnel & Fringe Notes

Reviewer Notes:
No Notes from National

Total Personnel and Fringe Budget: \$ 11,862.61
Total Expense Budget: \$ 6,137.39
Total Budget Amount: \$ 18,000.00



Program
Coordinator

FICA

7.65% \$676.26

SUTA

0.40% \$35.36

Workers Comp

0.20% \$17.68

Retirement

%

Other

%

Benefits Allocated to

\$729.30

Update Amounts

Click here if you need to add another staff person to your budget and repeat the previous steps.

Add Personnel

Add

Update Amounts

Personnel & Fringe Notes

If you need to step away from entering your budget, you may press "Save" and come back to continue later.

Reviewer Notes:

No Notes from National

Once you have entered all of the necessary Personnel and Fringe Benefits expenses, press "Next" to move on to the Expenses section of the budget.

Update Amounts

Save

Next

Total Expense Bud

Total Budget Amount: \$

Personnel

- Include a minimum of 1 Part-time (PT) position for the T.R.A.I.L. Program Coordinator;
- Any contracted person *regularly* involved with the T.R.A.I.L. program (e.g., Program Coordinator)

Personnel

- **Optional:** additional PT assistants and/or youth leaders;
- **Optional:** up to 10% for administrative/finance staff/other staff who indirectly assist with fulfilling program requirements (e.g., executive director, accountant, kitchen staff preparing healthy snacks, etc.);

Keep in mind that not all employees will be charging time to the grant for the entire grant year so number of weeks on program may vary for each staff member.

Personnel

Position Titles

- Titles should be short but descriptive
- Titles need to be position specific
 - Program Coordinator – Southside Branch
 - Program Coordinator – East End Unit
 - Program Aid #1
 - Program Aid #2

If you are a returning Club, you may refer to how entries are titled on your current budget for further examples.

Fringe Benefits

- You are not required to include fringe benefits in your budget, you may choose to include whatever makes the most sense for your Club.
- Fringe benefits should not be included if the position is filled by a contracted employee and not a regular employee.
- Insurance rates need to be based on employee only premium rates.

Fringe Benefits

- Health benefits need to be broken out into their own listings (i.e., Medical, Dental, Vision, etc.).
- Only fringe specifically listed in the budget may be claimed for reimbursement.
- An option for 'Other' is available if budgeting for a benefit that is not listed. This will need identified in the notes.

Budget Notes

- Budget Notes are where you will enter the budget narrative information.
- Detailed and/or clarifying information in regard to items listed in your budget are provided here.
- Narrative information needs to be included in the “Notes” section specific to each line item.

Budget Notes – Personnel/Fringe

- Include a brief description of the responsibilities and duties of each position in relationship to fulfilling the program goals and objectives.
- **Example Notes:**
 - Program Coordinator will be responsible for running the program, tracking youth, and completing required reporting.
 - CPO will fulfill administrative components of the program from the beginning of the LOA and will oversee that all program requirements are being fulfilled.

Budget Notes – Personnel/Fringe

- Clarifications such as if the CEO is also the actual Program Coordinator.
- Verify that all insurance rates are based on employee only premium costs.
- **Example Notes:**
 - Health and Dental insurance, based on employee only premium rates.



NCAI-00-000-AA-ZZ

TOTAL AWARDED: \$18

Expenses

Mark Inactive

Update Amounts

This is the Expenses page.
As with Personnel, you
add items and include
line item notes. To begin,
click "Add Expense"

Add Expenses

Item	Category	Rate	Quantity	Amount Allocated to Grant
------	----------	------	----------	---------------------------

Add Expense

Add Mileage

Update Amounts

Expense Notes

Reviewer Notes:

No Notes from National

Attachments

No Attachments Found



Add Expenses

Delete

Item	Category	Rate	Quantity	Amount Allocated to Grant	Notes
<input type="text"/>	Other Costs		1.00		<input type="text"/>

1

2

Enter the Item name.
Please use a **short** general descriptive name here.
Additional detailed information will be provided in the Notes.
Ex: Physical Activity Supplies; Healthy Foods; Program/Office Supplies; etc.

- Select the Item type:
- Equipment
 - Supplies
 - Travel
 - Contract Specialist
 - Other Costs

Attachments

Upload Attachment

Previous Update Amounts Save **Review and Submit**

Total Personnel and Fringe Budget: \$ 11,458.50
Total Expense Budget: \$ 6,137.39
Total Budget Amount: \$ 17,595.89



Add Expenses

Delete

Item	Category	Rate	Quantity	Amount Allocated to Grant	Notes
<input type="text"/>	Other Costs	<input type="text"/>	1.00		<input style="width: 20px; height: 20px;" type="text" value="+"/>

Enter the rate (\$) per unit. For entries such as "Program/Office Supplies" this will be a lump sum as opposed to a per item amount.

Enter the quantity purchased. Or in the case of a lump sum this will be 1. You may also enter a decimal if the cost of the item you are purchasing will be pro-rated to the program (it is not required that you pro-rate). (e.g., .75 = 75% charged to the grant – explanation will be needed in the notes)

Add notes to explain the item(s) and how it will be used for/related to the T.R.A.I.L. program. In the case of a more general line item entry, examples of what you plan to purchase is also needed. Notes are required for all line items.

No Notes from National

Attachments

8.50
7.39

Total Budget Amount: \$ 17,595.89



NCAI-00-000-EX-ZZ

TOTAL AWARDED: \$18,000.00

Expenses

Mark Inactive

Delete

Contract Specialist

Item

Healthy Cooking D

Physical Fitness/S

Equipment

Item

Laptop Computer

Other Costs

Item

Bowling

Skating

Swimm

Supplies

Item

Rate

Quantity

Amount Allocated to Grant

Notes

Notes for Healthy Cooking Demonstration

Reviewer Notes:

No Notes from National

Close

Save

When adding notes, this is the pop up that will appear. Please enter any necessary notes and press "Save" to close the screen and return to the budget entry page.



NCAI-00-000-EX-77

TOTAL AWARDED: \$18,000.00

Expenses

Contract Specialist

Rate = Per Hour or Per Session Fee
Quantity = Number of hours or sessions
Clarification for what each represents needs to be included in the notes.

Mark Inactive

Delete

Item	Rate	Quantity	Amount Allocated to Grant	Notes
<input type="checkbox"/> Healthy Cooking Demonstra	30.00	5.00	\$150.00	
<input type="checkbox"/> Physical Fitness/Sports Instr	50.00	5.00	\$250.00	

Equipment

Item	Rate	Quantity	Amount Allocated to Grant	Notes
<input type="checkbox"/> Laptop Computer	700.00	0.85	\$595.00	

Rate = Per Person Fee
Quantity = Number of people

Other Costs

Item	Rate	Quantity	Amount Allocated to Grant	Notes
<input type="checkbox"/> Bowling	8.00	25.00	\$200.00	
<input type="checkbox"/> Skating	10.00	25.00	\$250.00	
<input type="checkbox"/> Swimming	150.00	1.00	\$150.00	

Supplies

Rate = Group rate fee
Quantity = 1

Item	Quantity	Rate	Amount Allocated to Grant	Notes
------	----------	------	---------------------------	-------



Add Expenses

Delete

Item	Category	Rate	Quantity	Amount Allocated to Grant	Notes
<input checked="" type="checkbox"/>	Other Costs		1.00		+

Add Expense

Add Mileage

Update

Expense Notes

Reviewer Notes:

No Notes from National

Do not leave any empty items in the Add box. The system will try to save it for you and it will show up as an line item with a random string of numbers and letters as its title in your budget. Select these empty line items in the Add box and hit delete **before** saving or moving forward.

Attachments

Upload Attachment

Previous

Update Amounts

Save

Review and Submit

Total Personnel and Fringe Budget: \$ 11,458.50

Total Expense Budget: \$ 6,337.39

Total Budget Amount: \$ 17,795.89



Add Expenses

Delete

Item	Category	Rate	Quantity	Amount Allocated to Grant	Notes
<input type="checkbox"/> Zumba Instructor	Contract Specialist	20.00	10.00	\$200.00	+

Add Expense

Add Mileage

Update Amounts

Expense Notes

Click "Update Amounts" to calculate the amount allocated to the grant.

Reviewer Notes:

No Notes from National

Attachments

Upload Attachment

Previous

Update Amounts

Save

Review and Submit

Total Personnel and Fringe Budget: \$ 11,458.50

Total Expense Budget: \$ 6,137.39

Total Budget Amount: \$ 17,595.89



NCAI-00-000-EX-ZZ

TOTAL AWARDED: \$18,000.00

Expenses

Mark Inactive

Delete

Equipment

After clicking "Update Amounts" the online reporting site organizes the items entered per category

Item	Rate	Quantity	Amount Allocated to Grant	Notes
<input type="checkbox"/> Laptop Computer	700.00	0.85	\$595.00	+

Supplies

Item	Rate	Quantity	Amount Allocated to Grant	Notes
<input type="checkbox"/> Digital Camera	125.00	1.00	\$125.00	+
<input type="checkbox"/> Healthy Foods	1,300.00	1.00	\$1,300.00	+
<input type="checkbox"/> Printer	150.00	1.00	\$150.00	+

Update Amounts

Add Expenses

Delete

Item	Category	Rate	Quantity	Amount Allocated to Grant	Notes
------	----------	------	----------	---------------------------	-------

Add Expense

Add Mileage

Update Amounts



Add Expenses Delete

Item	Category	Rate	Quantity	Amount Allocated to Grant	Notes
<div style="display: flex; justify-content: space-between; align-items: center;"> Add Expense Add Mileage Update Amounts </div>					

Expense Notes

Reviewer Notes:
No Notes from National

Attachments

Upload Attachment

Click "Add Expense" to add a new expense item. Mileage is a special type of expense and may be added by clicking "Add Mileage."

The current reimbursable mileage rate is \$0.545. This should be entered for mileage unless your Club has a policy of reimbursing at a lower rate. If this is the case, please explain so in the notes for the "Mileage" line item.

The purpose and destination of travel should also be included in the Notes section.

Remember, only travel by personally owned vehicle should be entered in the budget via the Add Mileage option.

Update Amounts

Travel added via Club vehicle

1

The purpose and destination of the travel should be included in the line item notes, along with the total number of trips and R/T mileage estimate.

Add Expenses

Delete

Item	Category	Rate	Quantity	Amount Allocated to Grant	Notes
<input type="checkbox"/> Travel to purchase supj	Travel	250.00	1.00		+
<input type="checkbox"/> Mileage	Travel	.545	375		+

Add Expense Add Mileage Update Amounts

Expense Notes

Travel via personal vehicle

The purpose and destination of the travel should be included in the line item notes.

Reviewer Notes:
No Notes from National



Add Expenses

Delete

Item	Category	Rate	Quantity	Amount Allocated to Grant	Notes
------	----------	------	----------	---------------------------	-------

Add Expense

Add Mileage

Update Amounts

Expense Notes

Reviewer Notes:

No Notes from National

Attachments

No Attachments Found

Upload Attachment

Previous

Update Amounts

Save

Review and Submit

This notes section is utilized when submitting a request for a budget revision after your budget has been approved. No notes should be entered here during the original budget submission.

Notes from reviewers will appear here. These might include revisions needed if the budget is sent back for adjustment or corrections. During your original budget entry, this will be blank.

Budget: \$ 11,830.22

Total Expense Budget: \$ 6,169.78

Total Budget Amount: \$ 18,000.00



Add Expenses

Delete

Item	Category	Rate	Quantity	Amount Allocated to Grant	Notes
------	----------	------	----------	---------------------------	-------

Add Expense

Add Mileage

Update Amounts

Expense Notes

Reviewer Notes:

No Notes from National

Attachments

No Attachments Found

Upload Attachment

Click "Upload Attachment" to add a document to the budget.

Previous

Update Amounts

Save

Review and Submit

Total Personnel and Fringe Budget: \$ 11,830.22

Total Expense Budget: \$ 6,169.78

Total Budget Amount: \$ 18,000.00



No Notes from Affiliate

Reviewer Notes:

No Notes from National

Total Expense Budget: \$ 6,137.39

Attachments

Name

Workers Comp

Upload Attachment

Add New Document

- Workers Con ▾
- Workers Comp**
- SUTA
- Pension
- Other

1

Select the type of document you are uploading: Workers Comp, SUTA, Pension, or Other.

WC, SUTA, and Pension are the most common documents needed here, which is why they are listed out. Other is the catch all for any other document that may be needed.

Close

Save and Close

Upload New Attachment

General Notes from N

Reviewer Notes:

No Notes from National

Update Budget

Create Reimbursement

Total Budgeted Amount: \$ 18,000.00

There may be in-kind donations, as well as other leveraged funding used in order to implement the T.R.A.I.L. program.



No Notes from Affiliate

Reviewer Notes:

No Notes from National

Total Expense Budget: \$ 6,137.39

Attachments

Name

Workers Comp

Upload Attachment

General Notes from N

Reviewer Notes:

No Notes from National

Update Budget

Create Reimbursement

Total Budgeted Amount: \$ 10,000.00

There may be in-kind donations, as well as other leveraged funding used in order to implement the T.R.A.I.L. program.

Add New Document

SUTA ▾

Notes:

Close

Save and Close

Upload New Attachment

2

Click "Upload New Attachment"



No Notes from Affiliate

Reviewer Notes:

No Notes from National

Attachments

Name

Workers Comp

Upload Attachment

General Notes from N

Reviewer Notes:

No Notes from National

Update Budget

Create Reimbursement

Amount: \$ 18,000.00

There may be in-kind donations, as well as other leveraged funding used in order to implement the T.R.A.I.L. program.

Add New Document

File Name:

Choose File

File size is limited to Please upload PDF's ONLY.

Upload

Close

If you would like to rename the file for the upload, type in the new name here. Otherwise it will have the same as the file that is uploaded.

It is helpful if you rename the file to end with ".pdf" as some systems have challenges opening the file when renamed without this format label.

Click "Choose File" to select the file to upload. The file must be a pdf.

Once you have selected the file, make sure you click "Upload."



No Notes from Affiliate

Reviewer Notes:

No Notes from National

Attachments

Name

Workers Comp

Upload Attachment

General Notes from N

Add New Document

Attachment uploaded successfully. Click "Choose File" to upload another attachment, or "Close" if you are finished.

File Name:

Choose File No file chosen

File size is limited to 5mb. Please upload PDF's ONLY.

Upload

Close

You will receive a confirmation message if your upload was successful.

1

When you are done, click "Close."

2

3

If you choose to upload another file at this point, it will come under the same document type (e.g., WC, SUTA, etc.) as the already uploaded file. To upload another document of a different type, you will need to click Close and then Upload Attachment again.

Budget: \$ 6,137.39

Amount: \$ 18,000.00

order to implement the T.R.A.I.L. program.



No Notes from Affiliate

Reviewer Notes:

No Notes from National

Total Expense Budget: \$ 6,137.39

Attachments

Name	Notes	Edit	View Attachment(s)
SUTA			TestDocumentation.pdf
Workers Comp			UserRequest-Personnel.pdf

Upload Attachment

To view an uploaded file, click on the link for the document under "View Attachment(s)."

If you need to delete an attachment (e.g., uploaded the incorrect document), please contact a T.R.A.I.L. finance team member at FirstPic for assistance.

General Notes from National

Reviewer Notes:

No Notes from National

Update Budget

Create Reimbursement

Total Budgeted Amount: \$ 18,000.00

There may be in-kind donations, as well as other leveraged funding used in order to implement the T.R.A.I.L. program.



Add Expenses

Delete

Item	Category	Rate	Quantity	Amount Allocated to Grant	Notes
------	----------	------	----------	---------------------------	-------

Add Expense

Add Mileage

Update Amounts

Expense Notes

Reviewer Notes:

No Notes from Reviewer

When you are done, hit "Review and Submit."

This will take you to a screen where you can review what you have created before final submission.

Attachments

No Attachments

Upload Attachment

Previous

Update Amounts

Save

Review and Submit

Total Personnel and Fringe Budget: \$ 11,830.22

Total Expense Budget: \$ 6,169.78

Total Budget Amount: \$ 18,000.00



NCAI-00-000-EX-ZZ

TOTAL AWARDED: **\$18,000.00**

Organization: BGC of Example Land

Date Range: -

Duration:

Status: Incomplete

Total Budgeted: \$0.00

Requested Amount: \$0.00

Approved Amount: \$0.00

Balance: \$0.00

NOTE: This budget has not yet been submitted. Please review and click submit.

Submit

If these numbers are different, you are required to enter information in the Personnel & Fringe notes explaining/justifying the proposed amount.

Attachments

No Attachments Found

Upload Attachment

Previous

Update Amounts

Save

Review and Submit

Total Personnel and Fringe Budget: \$ 11,830.22

Total Expense Budget: \$ 6,169.78

Total Budget Amount: \$ 18,000.00



between airport and Mystic, CT									
Per Diem - Full days	\$64.00	2.00	\$128.00	\$128.00	\$0.00	\$0.00	\$128.00		
Per Diem - Travel Days	\$48.00	2.00	\$96.00	\$96.00	\$0.00	\$0.00	\$96.00		

Expense Notes

No Notes from Affiliate

Reviewer Notes:

No Notes from National

Total Expense Budget: \$ 10,158.33

Attachments

No Attachments Found

Upload Attachment

If you discover you need to make changes before submitting, scroll to the bottom of the review page and click on "Update Budget." This will take you to the beginning of the process and you will just click through until you get to whatever it is you need to adjust.

General Notes from National

Reviewer Notes:

No Notes from National

Update Budget

Total Budgeted Amount: \$ 19,425.00



NCAI-00-000-EX-ZZ

TOTAL AWARDED: \$18,000.00

Organization: BGC of Example Land

Date Range: -

Duration:

Status: Incomplete

Total Budgeted: \$0.00

Requested Amount: \$0.00

Approved Amount: \$0.00

Balance: \$0.00

NOTE: This budget has not yet been submitted. Please review and click submit.

Submit

Once you have everything entered the way you want, you must hit this submit button to complete the process and submit your budget for review.

Personnel

Title	Hourly/Salary	Rate/Salary	Wk Gr	Approved Amount	Balance	Notes	
Accountant	<input checked="" type="checkbox"/> Salary	\$26,000.00	40.00	\$0.00	\$0.00		
CPO	<input checked="" type="checkbox"/> Salary	\$33,800.00	48.00	3.0%	\$0.00	\$0.00	
Program Assistant	<input checked="" type="checkbox"/> Hourly	\$9.25	14.00	25.0%	\$0.00	\$0.00	
Program Coordinator	<input checked="" type="checkbox"/> Hourly	\$13.00	34.00	50.0%	\$0.00	\$0.00	

Fringe Benefits

Title	Medical	Dental	Vision	Short Term	Long Term	Life	Other
Accountant	<input type="checkbox"/> FICA 7.650% \$30.52	<input type="checkbox"/> SUTA 0.400% \$1.60	<input type="checkbox"/> Workers Comp 0.200% \$0.80	<input type="checkbox"/> Retirement	<input type="checkbox"/> Other		

Helpful Tips

Equipment

- List nonexpendable items **\$500 and over** that will be purchased. (**Example:** Laptop Computer)
- Sites that have already purchased certain items with T.R.A.I.L. funds, such as a computer, within the last three years cannot purchase another one under this funding cycle.
- Provide information regarding how the equipment will be used to support/enhance the T.R.A.I.L. program in the notes.

Example notes: Laptop computer to be used for accessing curriculum information, researching healthy snack recipes and new physical activity ideas as well as tracking participation and program reporting for the T.R.A.I.L. program.

Supplies

- Enter **brief title** for the line item. (**Example:** Healthy Foods)
- Supplies include any materials that are expendable or consumed during the course of the program and **nonexpendable items under \$500.**
- Nonexpendable items, especially items of significant value (over ~\$75), need to be listed in their own individual line items (e.g., t-shirts, printers, digital cameras, etc.).
- Office/Program Supplies, Healthy Foods, Physical Activity Supplies, etc. each need to be listed as their own line item.

Supplies

- Provide information regarding how the supplies will be used to support/enhance the T.R.A.I.L. program in the notes.
- **Healthy Snacks:** List types of food items you plan to purchase as healthy snacks and for what events/activities.
- **Office/Program Supplies:** List examples of items you plan to purchase in this line item.
- **Physical Activity Supplies:** List examples of items you plan to purchase in this line item.
- **All Non-expendable items:** List how each item will be used with the T.R.A.I.L. program (remember to include a comment regarding the safety component for t-shirts).

Supplies

Example Notes:

- Healthy snacks will be provided to T.R.A.I.L. participants during regular meeting times and at various intervals throughout the year. Snack items will consist of fresh fruits and vegetables, whole grain breads/crackers, and bottled water as well as other items as outlined as acceptable for the T.R.A.I.L. program. Gatorade type beverages will be provided for participants after strenuous physical activities. Healthy food items for the hands-on cooking demonstration will also be purchased with these funds. Healthy snacks or lunches, as determined by the length of the trip, will be provided to T.R.A.I.L. participants during special events such as bowling, skating, swimming, etc.

Supplies

Example Notes:

- Office/Program Supplies such as paper, markers, poster board, paper plates, napkins, toner cartridges, etc. will be purchased for program implementation and administrative components of the T.R.A.I.L. program.
- Physical Activity Supplies such as various balls, lacrosse equipment, etc. will be purchased to support the physical activity component of the T.R.A.I.L. program.

Supplies

Reference the [T.R.A.I.L. resources section](#) of NAClubs.org for guidance on allowable items before purchasing snacks/food for the T.R.A.I.L. program. (Password: healthylifestyles)

Supplies

Office/Program Supplies:

- Materials needed to implement the curriculum (paper, markers, pencils, butcher paper, card stock, etc.)
- Paper products for serving healthy snacks (paper plates, napkins, cups, etc.)
- Record keeping materials (folders, notebooks, paper, binders, pens, etc.)
- Toner cartridges
- Community Service Project supplies (Informational Materials [paper handouts, display boards, healthy food display, etc.]; Gardening Supplies [seeds, starter plants, shovels, watering cans, etc.])
- Kitchen Supplies (<~\$75*) (blender, mixer, measuring cups, juicer, food dehydrator, etc.).

***Reminder:** Items of significant value (~\$75+) will need their own line item for specific approval of that item.

Supplies

Physical Activity Supplies:

- Sporting Equipment (various balls, bats, lacrosse equipment, hula hoops, Frisbees, jump ropes, portable basketball hoops, Zumba DVDs, etc.);
- SPARK Physical Activity Supplies;
- Pedometers;
- Bikes, roller blades, helmets, skating safety pads, etc.*

***Reminder:** Items of significant value (~\$75+) will need their own line item for specific approval of that item.

Supplies

- **T-Shirts** (less than \$10/shirt including any screen printing fees)
 - **Example Notes:** T-shirts will be purchased for safety purposes and easily identifying T.R.A.I.L. participants during special events.
- **Printers** (less than \$150)
 - **Example Notes:** Printer will be used by the T.R.A.I.L. program for printing program handouts, flyers, information for parents, etc.
- **Digital Cameras** (less than \$150)
 - **Example Notes:** Camera will be used by the T.R.A.I.L. program for taking pictures during curriculum lessons, physical activity, special events, etc. Photos will be used for promoting the program and required reporting.
- **Storage Cabinets for T.R.A.I.L. supplies**
 - **Example Notes:** Storage cabinets will be used for storing T.R.A.I.L. program supplies.

Travel – Club Vehicle

- Enter a brief title for the item. (**Example:** Skating Transportation)
- The purpose(s), destination(s), number of trips, and approximate round trip mileage of each trip needs to be included in the line item notes.
 - **Example Notes:** Travel by Club vehicle to transport T.R.A.I.L. youth skating three times during the year, 45 R/T miles each trip.
- Reimbursement will be made via mileage logs and gas receipts.

Travel – Personal Vehicle

- The purpose(s), destination(s), number of trips, and approximate round trip mileage of each trip needs to be included in the line item notes.
 - **Example Notes:** Travel by CPO using personal vehicle to closest store to purchase T.R.A.I.L. program supplies, etc. Approximately six trips throughout the year of 60 R/T miles each trip.
- Reimbursement will be made via mileage logs not to exceed the current GSA mileage rate.

Travel

At this time – the following costs for attending National Training will be covered directly by NCAI and should not be included in your budget.

- Hotel
- Airfare
- R/T mileage if driving
- Per Diem

The exact location and dates for training are yet to be determined.

Travel

The following travel costs for attending National Training should be included in your budget if applicable.

- **Local Ground Transportation (airport)**
 - **Mileage** – follow travel by personal vehicle instructions. If mileage is already included for other purposes in your budget, include this in the same line item adding the additional travel information in the notes
 - **National Training – R/T Airport transportation** (this could be a shuttle, taxi, Uber, Lyft, etc.)
- **National Training – Airport Parking** (training will most likely be two full days, so 3-4 days parking would be reasonable)
- **National Training – Baggage Fees**

Contract Specialists

- Enter brief title for the item. (**Example:** Zumba Instructor)
- Includes physical activity instructors, healthy cooking instructors, guest speakers, etc.
- Consultant fees may not exceed \$650.00 for an 8 hour day (\$81.25/hour)

Contract Specialists

- If there is a set fee per session, enter as total fee (rate) x number of sessions (quantity)
- If there is an hourly rate, enter as hourly cost (rate) x number of hours (quantity)
- Provide detailed information regarding what the contract specialist will be doing and how their services support/enhance the T.R.A.I.L. program in the notes.

Contract Specialists

Example Notes:

- **Healthy Cooking Demonstration:** A nutrition specialist will be contracted to provide a hands-on cooking demonstration for T.R.A.I.L. participants focused on healthy meals. Prep time will include planning the menu, shopping for supplies, and preparing the presentation. The demonstration will be approximately 2 hours.
- **Physical Fitness/Sports Instruction:** A fitness instructor will be contracted to teach 5 classes to T.R.A.I.L. participants throughout the year on different physical activities such as Zumba, Yoga, weight training, etc.

Other Costs

- Enter brief title for the item. (**Example:** Skating Admission Fee)
- **Per person fee:** enter as cost per person (rate) x number of participants (quantity)
If you will be taking several trips, quantity should be number of participants x number of trips with an explanation about this in the notes.
- **Flat group rate fee:** enter group cost (rate) x number of trips (quantity)

Other Costs

- Admission fees for Physical Activity Field-Trips/Events
 - Bowling
 - Swimming
 - Skating

Funds budgeted for Special Events may ONLY be spent on T.R.A.I.L. participants.

NOTE: Transportation costs related to special events need to be listed in the *Travel* category. Healthy food expenses related to special events need to be included in the *Supplies* category (Healthy Foods line item).

Other Costs

Example Notes:

- **Bowling:** T.R.A.I.L. participants will go bowling to support learning about different types of physical activities available in the area. Funds will cover lane time/shoe rental.
- **Skating:** T.R.A.I.L. participants will go skating to support learning about different types of physical activities available in the area. Funds will cover skating/skate rental.
- **Swimming:** T.R.A.I.L. participants will go swimming to support learning about different types of physical activities available in the area. Funds will cover the flat rate admission cost to the pool.

Questions?



Office Hours

Time/Date: 3:00-5:00pm EDT, Tuesday, July 31

Dial-in: 716-273-1030

Pin: 892 4007#

<https://www.anymeeting.com/346-494-006>

Questions or Further Assistance

Aji Bakare: abakare@firstpic.org

Matt Bieler: mbieler@firstpic.org

David Cook: dcook@firstpic.org

Robin Paterson: rpaterson@firstpic.org

Phone: 443-302-2080