



THE TRAIL FUND Legacy Trails Program INVOICING AND REPORTING

Notify your local USFS

American Trails manages the program and awards the funding.

Please notify your local USFS contact person when you invoice us.

This would be the person who wrote the letter of support for your project when you applied.



Invoicing

- Complete work first, for reimbursement
- Keep good records
- Refer to Quick Guide to Invoicing



Our Invoice Portal

Americantrails.org

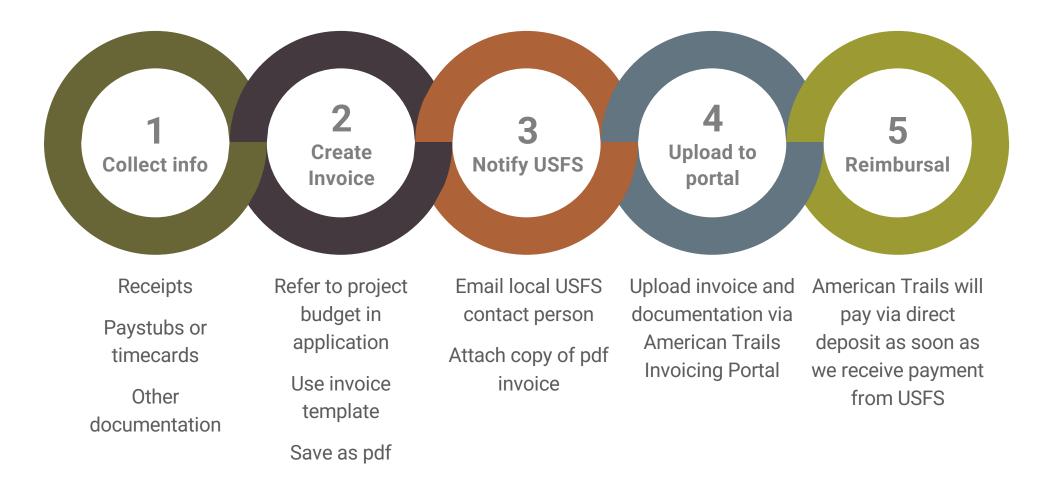
INVOICING & REPORTING

Use our Invoicing Portal to upload your invoices.

Reporting

- Progress check-ins
- Final report

The Invoicing Process





2023 Legacy Trails Program Grant Awardee Portal

Below you will find documents that may be useful as you prepare your invoices.

Please review the **Guide to Invoicing** to answer any questions, as you prepare to ask us for reimbursement of project expenses.

So that invoices are as consistent as possible, we request that you please use our Excel-based **Invoice Template** to prepare each of your invoices, and our digital **Invoicing Portal** for uploading them.

Invoices not received by the 1st of the month will be included in the next month's batch.

Have questions? Send an email to trailfund@americantrails.org or the Trail Fund Director Cathy Corlett at Cathy@americantrails.org.



Frequently Asked Questions

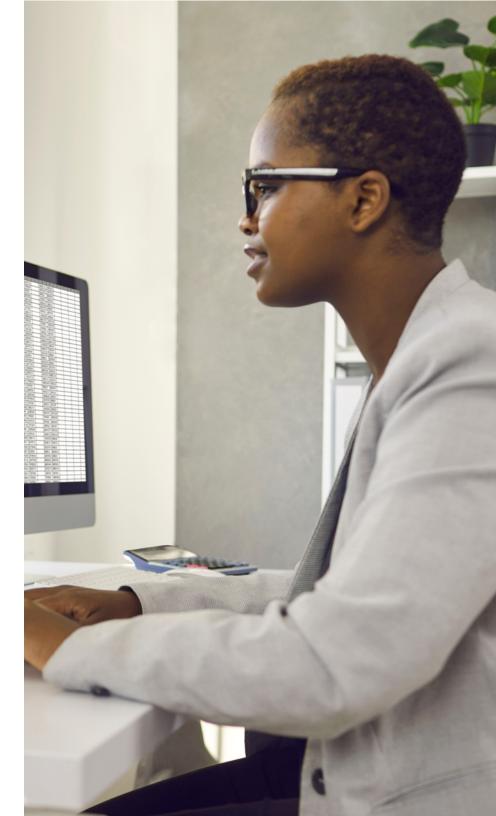
From the Quick Guide to Invoicing

How are the Legacy Trails Program funds managed?

This funding program is part of a larger Forest Service Challenge Cost-Share Agreement and therefore all funds are managed as reimbursable funds.

This means that organizations must complete work first, then seek reimbursement based on the approved budget and work plan provided as part of the program.

Awarded organizations will submit invoices, based on their actual project expenses, for reimbursement periodically.





How frequently will project costs be reimbursed? Reimbursement is based on when invoices are submitted. Organizations may choose to submit invoices monthly, several times during the agreement period, or just at the completion of the project.

The choice is your based on your organization cash flow needs. If monthly, invoices should be submitted by the 1st of each month, for work completed during the previous month or period, during the life of these project agreements until awarded funds are expended. If your invoice is received on or after the 1st of the month, it will be processed on the next month's billing period.

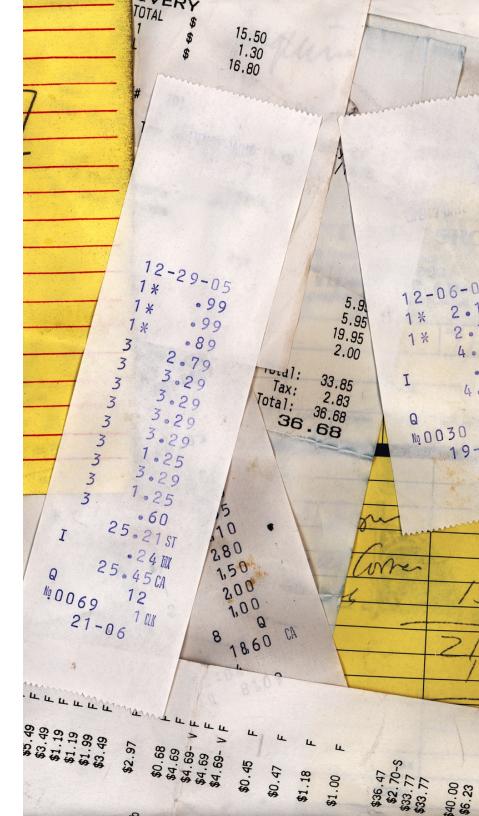
American Trails consolidates all invoices received by the 1st to submit a payment request to the Forest Service by the 15th of the month. It may take 45-60 days for payment to reach American Trails and reimbursements to be issued to organizations. We usually make direct deposits to your organization within 5-10 business days of the receipt of funds.

What do I do with my receipts?

Please keep all receipts. When you submit your invoices, please attach scanned copies (.pdf's) of all materials, equipment, supplies, contract payments, etc, that are purchased with these funds.

For the project overhead category of your budget, please also document personnel and fringe benefits paid through this grant and submit timecard(s) and/or payroll reports with each invoice. If there are questions about any requests, we may ask for copies of any other relevant paperwork.

Receipts should be kept for three years following the project in case we need to request that information for an audit. Please keep personnel records applied to project overhead on file for at least 3 years.





How does my organization receive reimbursement?

American Trails will provide reimbursement through Direct Deposit to your bank account. There have been problems in the past with lost checks and delays when mailing checks. Please fill out a Direct Deposit form.

If your organization does not have the ability to receive Direct Deposit, please notify us so alternate arrangements can be made.

Other Questions?

Please feel free to contact Candace Gallagher, American Trails Operations Director at Candace@americantrails.org for other invoicing questions.

Preparing an invoice

- Please rename the digital file with your organization/project and invoice date
- Replace the green text with your info
- Refer to the budget from your application
- Categories are the same

Legacy Trails Program Invoice 2023

(Insert name of your organization here)

(Insert project name here)

(insert invoice date here)

| NOTE: Please save and rename file with organization name, project name and date of invoice | (a) Legacy Trails Grant Funds Requested | (b) Partner Non- Federal Cash Funds | (c) Partner In-Kind Contributi ons | (d) Other Federal Funds | (d) Total Category Value | |
|---|--|--|--|-------------------------------|--------------------------------|--|
| Salaries (wages) Position*Rate*Time | | | | | | |
| | [] | [| 1 | [| s - | |
| | | | | | \$- \$- | |
| | | | | | \$- | |
| | | | | | \$- | |
| | | | | | \$- | |
| Subtotal | \$- | \$- | \$- | \$- | \$- | |
| Fringe Benefits | | | • | | | |
| Position*Rate*Time | | | | | | |
| | | | | | \$- | |
| | | | | | \$- | |
| | | | | | \$- | |
| | | | | | \$- | |
| | | | | | \$- | |
| Subtotal | \$- | \$- | \$- | \$- | \$- | |
| Travel/Transportation #People*#Trips*Perdiem/Mileage or Actual Costs | | | | | | |
| | | | | | \$- | |
| | | | | | \$- | |
| | | | | | \$- | |
| | | | | | \$- | |
| | | | | | \$- | |
| Subtotal | \$- | \$- | \$- | \$- | \$- | |
| Equipment Type*Qty*Cost | | | | | | |
| | | | | | \$- | |
| | | | | | \$- | |
| | | | | | \$- | |
| | | | | | \$- | |
| | | | | | \$- | |
| Subtotal | \$- | \$- | \$- | \$- | \$- | |

Legacy Trails Program Invoice 2023

(Insert name of your organization here)

(Insert project name here)

(insert invoice date here)

| NOTE: Please save and renam file with organization name, project name and date of invoice | e (a) Legacy Trails Grant Funds Requested | (b) Partner Non- Federal Cash Funds | (c) Partner In-Kind Contributio ns | (d) Other Federal Funds | (e) Total Category Value |
|--|---|--|--|-------------------------------|--------------------------------|
| Materials/Supplies | | | | | |
| Type*Qty*Cost | | 1 | 1 | | 1. |
| | | | | | \$ - |
| | | | | | \$- \$- |
| | | | | | |
| | | | | | \$ - |
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| Subtot | al \$ - | \$- | \$ - | \$- | \$ - |
| Contractual Individual Contract | | | | | |
| | | | | | \$ - |
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| Subtot | a/ \$ - | \$- | \$- | \$- | \$- |
| Training Type*Qty*Cost | | | 1 | | 1 |
| | | | | | \$ - |
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| | | | | | \$ - |
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| Other | ai ş - | ə - | - v | ə - | \$- |
| Type*Qty*Cost | - 1 | 1 | T | | T a |
| | | | | | \$ - |
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| | | - | | | \$ - \$ - |
| | | | + | | \$ - \$ |
| Subtot | a/ \$ - | \$ - | \$ - | \$ - | \$ - \$ |
| Total Direct Charges | \$ - | \$ - | \$ - | \$ - | |
| Indirect Charges | | | | | \$- |
| Up to 10% of Modified Total Direc | t Costs may be | requested | | | |
| Total Indirect | ts \$ - | \$ - | \$ - | \$ - | \$ - |
| | | Ψ - | Ψ - | ¥ - | • |
| Grand Tota | | | | | |
| This is the amount of you | | | | | |
| Reques | st \$ - | \$. | - \$ - | \$- | \$- |

- Add additional lines or pages if needed
- Save as .pdf when finished
- Make sure the amount of your request matches what you input into the Invoice Portal

Add lines as needed.



2023 Legacy Trails Program Awardee Invoice Submission Form

Invoices received after the 1st of each month will be processed with the next month's batch. Payment will be via direct deposit. Please go to the <u>Awardee Portal</u> to download our **Guide to Invoicing** and **Invoice Template**.

| Organization Name * | |
|------------------------|--|
| Project Name * | |
| | Please be brief – Use the project name on your Awardee Agreement |
| Your Name | |
| | First Name Last Name |
| Your Email * | ex: myname@example.com |
| | example@example.com |
| Invoice Date * | |
| | Month Day Year |

- Grant Funds Requested is the amount we will reimburse you.
- Please make sure the amounts you input here match the totals at the bottom of the Invoice document.

Grant Funds Requested *

| e.g., | 23 |
|-------|----|
|-------|----|

Enter total Legacy Trails Program funds requested for this billing period not including match amount(s). Please enter numbers only, no commas or \$.

Total Cash Match * e.g., 23

Please enter numbers only, no commas or \$.

Total in-kind Match *

Please enter numbers only, no commas or \$.

Total Other Federal e.g., 23 Matching Funds * Please enter r

Please enter numbers only, no commas or \$.

e.g., 23

Comments

| Name of local USFS unit contact person * | First Name | Last Name | | |
|--|--|--------------------------------------|--|-------------------------|
| Email for local USFS unit contact person * | | is person to let t | hem know you have su | bmitted an invoice. |
| I understand I must email my local USFS unit contact person a copy of the invoice I am uploading through this portal within 5 days. * | ⊖ Yes | out | your respon to your USFS son in a time | |
| Please attach your invoice * | Upload a File Please use the Excel invoice template provided. Save as pdf before uploading. | | | |
| Please attach original receipts and paystubs * | | No file chosen travel, staff time | and other expenses. Pe | df file type preferred. |
| Please attach any additional receipts and paystubs | Choose File No file chosen Please document travel, staff time and other expenses. Pdf file type preferred. | | | |
| Please attach any additional receipts and paystubs | Choose File No file chosen Please document travel, staff time and other expenses. Pdf file type preferred. | | | |
| | Save | Submit | 📄 Print Form | |

REPORTING

Project Progress Summary

Agency/Partner Coordination

- Describe communication/coordination with USFS and any other project partners.
- What is working well?
- What could be improved?

Take project photos

- Volunteers working, group photos
- Project improvements made (before, during, after)

Milestones and lessons learned

- Timeline: What factors kept project on track or necessitated adjustments?
- What were significant project milestones?
- Key lessons: What will make future projects better?

Demonstrate engagement

Memorable quotes from volunteers and staff

REPORTING

Project Progress Summary

Summary of Accomplishments

- # volunteers engaged
- # volunteer hours
- # staff and crew employed
- # staff and crew hours

Budget Summary

- Amount spent (interim or final)
- Cash match
- In-kind match

Project Scope and Accomplishments

• What was accomplished using grant funds?

Project Metrics

- Priority environmental goals
- Trail improvements by the mile
- Trail/stream crossings

Grant Intent

To carry out projects on National Forest System Trails and trail bridges to improve resilience to weather events, flooding, or other natural disasters.







Metrics

Priority goals

- Improves a watershed that supplies a public drinking water source
- Number of listed species positively impacted
- Cultural impacts mitigated

Trail improvements by the mile

- Deferred maintenance miles
- Miles of trail improved or relocated
- Miles of unauthorized trails decommissioned
- Miles of closed trails decommissioned
- Miles of road converted to trail
- Miles of upstream habitat reconnected
- Trail/stream improvements
- Number of trail bridges
- Number of culverts replaced





Cathy Corlett Trail Fund Program Director Cathy@americantrails.org

THE TRAIL FUNDLegacy Trails Program INVOICING AND REPORTING

Candace Gallagher

Operations Director Candace@americantrails.org