



PROJECT NAME: _____

PROJECT ID NUMBER: _____

REPORTING PERIOD: From _____ To _____

PERSONNEL						
Doc Id #	Employee Name/Title/Category	Cost per Item	Effort Percent	Unit Cost	Federal Share	Match Share
Total Cost						

Instructions:

- Document number:** Assign an identification number or letter to each time and activity sheet, paystub, proof of payment and to any back up documentation related to the cost reimbursement requested
- Employee name, title, category:** Enter employee information, or category/expenditure type e.g., FICA, retirement, etc. as listed in the approved grant budget
- Cost per item:** Total wages/salary paid, gross or adjusted gross salary (do not enter the Unit Cost listed on GEMS)
- Effort percent:** Enter the percentage of time spent working on the GCC grant, pull from time and activity sheet (line 39 on multiple funding source time and activity sheet, and line 38 on single funding source time and activity sheet) must include time spent working on other projects and from all funding sources
- Unit cost:** Enter the cost amount allocated to the project (cost per item x effort % = unit cost)
- Federal share:** Enter amount of to be paid by the grant
- Match share:** Enter amount of to be paid by the grantee agency (if applicable)

For this request to be approved, back up documentation must be included with this coversheet: A signed GCC Time and Activity sheet for each employee and volunteer, paystubs, all back up documentation for all categories FICA, retirement, health insurances and other fringe benefits, proof of payment to any costs related to reimbursement requested. Failure to comply with these instructions may result in the delayed or denial of this request.