

**See also BLM files.**

## **Challenge Cost Share Project Coordination Procedure**

The position of Challenge Cost Share Program (CCSP) Coordinator has been established to receive expense documents from OCTA volunteers, audit them, and submit invoices to the federal government (e.g., the National Park Service or Bureau of Land Management) for reimbursement. The Coordinator reports directly to the Treasurer, coordinates trail preservation-related issues with the Trail Mapping and Marking Chair, and brings issues-concerning non-performance on CCSPs by OCTA volunteers to the attention of the president of OCTA.

In preparation for the Convention and Midyear National Board of Directors meetings, the Coordinator submits project status reports to the Trail Mapping and Marking Chair.

### **I. Overview of OCTA and Federal Agency Agreements**

Under the terms of a CCSP agreement, the federal agency typically agrees to provide project funding not to exceed a budgeted amount to be used for travel, lodging, and per diem for project volunteers, as well as for contract personnel, project materials and supplies, equipment and other miscellaneous expenses. The Oregon California Trails Association, under the terms of the agreement, commits to donating an agreed-upon amount of volunteer hours at the prevailing hourly rate and other expenses to carry out the project.

The Coordinator, through the process of auditing the submitted invoices, charge slips, and OCTA volunteer and reimbursement tracking forms, is responsible for ensuring mathematical accuracy, adherence to specified meals, lodging and mileage rates and limitations, and that summary reports are in accordance with the required formats.

Upon completion of the audit, the Coordinator prepares an OCTA invoice for the total amount requested, sends the original and supporting documentation to the appropriate federal agency, and provides a copy of all the material to National OCTA in Independence.

Subsequently, the federal government issues a check in favor of OCTA for the approved amount and sends it to the National OCTA Office, which in turn issues reimbursement checks to all project participants.

Due to the varying nature of CCSP projects, procedures for a specific project may vary. However, these variations will be approved by the Coordinator and shall not in any case eliminate the role of the Coordinator.

### **II. NPS Cooperative Agreements, Task Agreements**

As of 2008, the first yearly project between OCTA and the National Park Service is the Base Cooperative Agreement (CA), with further CAs or Challenge Cost Share Projects (CCSPs) added as Task Agreements (TAs). CA base projects and TAs may or may not require that the funding provided by NPS be matched by volunteer hours. Project tracking numbers ending in SCF require matching hours; those with SZS usually do not.

NPS-OCTA projects that do require volunteer hour matches are CCSPs, and typically are indicated by the SCF at the end of a project number. The OCTA Cost Share Reimbursement Coordinator audits and invoices CCSP reimbursement requests and sends them to the NPS Cost Share Coordinator.

- **Handling Exception.** The 2008 In Pursuit of a Dream SCF project is handled by Headquarters.

NPS-OCTA CAs (SZS) are managed between OCTA Headquarters and NPS and as such are not the subject of this description. Usually, not always, SZS at the end of a project number or TA indicates that it does not require matching hours.

- **Handling Exception.** At the request of the mapping and marking chair, the cost share coordinator handles the 2008 preservation project like an SCF Cost Share, even though its TA number ends in SZS.

### III. NPS/OCTA Project Initiation Roles and Responsibilities

The CCSP coordinator, the OCTA director and officers and members of the Board of Directors are to be promptly informed about project requests (before they come to the agreement-signing stage). The following steps address better communication between NPS and OCTA during all stages of project development and completion.

1. **Project Requestor Responsibility:** Beginning in 2009, project proponents will still initiate proposals by sending them to the NPS Cost Share Coordinator, Lee Kreutzer, [Lee\\_Kreutzer@nps.gov](mailto:Lee_Kreutzer@nps.gov). Ideally, OCTA project requestors will also send a copy of their proposal to the OCTA Cost Share Coordinator (Marley Shurtleff, [shurtgarymarley@comcast.net](mailto:shurtgarymarley@comcast.net)) when they begin the application process.
2. **NPS Project Advisors:** NPS staff advisors prefer to work with project proponents prior to the submittal due date to ensure that proposals are adequately planned and budgeted and meet CCSP qualification criteria; therefore, proponents are encouraged to directly contact the trails office well in advance of the due date. Initial contact concerning a project idea may be made with any of the Salt Lake City trails staff, but first draft proposals should be sent directly or copied to [Lee\\_Kreutzer@nps.gov](mailto:Lee_Kreutzer@nps.gov). Lee handles project paperwork, writes the agreements, keeps the yearly project logs and permanent records, and reviews and approves project invoices.

Upon receipt of a verbal or written CCSP proposal, Lee will refer road sign or interpretation projects to Chuck Milliken ([Chuck\\_Milliken@nps.gov](mailto:Chuck_Milliken@nps.gov)), and mapping projects to Kay Threlkeld ([Kay\\_Threlkeld@nps.gov](mailto:Kay_Threlkeld@nps.gov)) for purposes of technical assistance and advice within their areas of expertise. Lee will advise regarding research, archeology, and anything that falls in the gap. Completed proposals are to be sent to Lee for logging and processing, although proponents are encouraged to copy their staff advisor, as well. All three staff, as well as Superintendent Aaron Mahr and any other personnel he may appoint, typically review final proposals jointly for completeness, feasibility, appropriateness of the budget, safety or legal concerns, and identification of proposed NPS "substantial involvement." The CCSP team as a whole, not individual NPS employees, then makes funding decisions.

3. **NPS Notification to OCTA:** To ensure that the OCTA board, officers, and association manager are informed from the beginning, Lee will send to the coordinator the project cover sheet to provide the name of the project, the amount, the project coordinator, and the chapter.
4. **Coordinator Responsibility:** The coordinator will forward the project cover sheet to the Association Manager.
5. **Association Manager Responsibility:** The Association Manager will distribute the information to the board and officers, as appropriate.
6. **OCTA leadership Responsibility:** OCTA leadership should bring concerns about the proposal to Lee's attention promptly, before the process of grant development advances.
7. **Proposal Agreement Completion:** When a proposal is finalized, Lee emails copies of the proposal and Cooperative Agreement to the OCTA president and the coordinator. The president prints and signs three copies of each document and mails them back to Lee at NPS. The president also signs other mandatory federal forms that may be forwarded to him or her electronically or via surface mail.

### IV. BLM Grants

In 2009, Cost Share agreements with BLM are arranged between the state agency and the project manager. Copies of BLM agreements are sent to the Coordinator who ensures that copies are provided to OCTA HQ and the Mapping and Marking Committee chair.

BLM projects are audited and reimbursements are handled similarly to NPS projects.

## V. Submitting NPS Reimbursement Requests

New simplified process OCTA can use for CCSP project agreement reimbursement requests:

### A. Responsibilities of Project Officer in Charge of Fiscal Matters

The project fiscal officer who is identified on the CCSP proposal must submit claims for reimbursement and matches to the OCTA CCSP Coordinator. Claims, including match, must be supported with receipts, signed time and mileage sheets, etc. A brief written summary of work accomplished during the performance period must accompany the claim. These reports are required under the terms of every Cooperative Agreement.

### B. Responsibilities of the OCTA CCSP Coordinator. The CCSP Coordinator will:

1. Collect, examine, and audit project reimbursement and match requests. Reimbursement requests are to be evaluated according to Circular A-122, Cost Principles for Non-Profit Organizations, as specified in each Cooperative Agreement. The circular identifies what costs are and are not allowable. Circular A-122 is available on-line at [http://www.whitehouse.gov/omb/assets/omb/circulars/a122/a122\\_2004.pdf](http://www.whitehouse.gov/omb/assets/omb/circulars/a122/a122_2004.pdf) and a Table of Contents for selected items of cost is provided on page 18 of that document. Requested reimbursement and matching costs must meet criteria for allowability. If the Coordinator has questions concerning allowability of any request, he or she may contact the NPS Trails Office CCSP Coordinator for clarification and guidance.
2. Prepare the reimbursement/match request for submittal to the NPS CCSP Coordinator.
  - a. *Reimbursement Requests to be submitted to Lee Kreutzer* shall be prepared using Government Standard Form 270 (<http://www.whitehouse.gov/omb/grants/sf270.pdf>). OCTA HQ and the CCSP Coordinator may use this form for any of the agreements administered by Lee Kreutzer or Teresa Bichard, regardless of the suffix (SZS or SCF). These forms are required by the Office of Management and Budget for the processing of federal grant reimbursements, and have been used by the CCSP program administered by the Santa Fe historic trails office for a number of years.

When using SF 270, it will no longer be necessary for the CCSP Coordinator or project director to produce separate invoices on organizational letterhead. A sample form is provided with specific directions typed into the blocks. (See next pages.) The CCSP Coordinator fills out the form as indicated, prints it, signs in block 13, and sends it to Lee. The NPS receiver signs the "Agency Use" block and forwards it to the regional contracting officer.
  - b. Reimbursement requests for projects being administered by Kay Threlkeld will still require the prepared invoice and NOT the SF 270. Eventually, her projects, such as COED, will close out and everyone will use the new format.
3. Submit the Request for Reimbursement, along with supplemental documentation and the performance summary prepared by the project manager, to the appropriate NPS coordinator (Lee Kreutzer, Teresa Bichard, or Kay Threlkeld). The NPS will keep the paperwork for a period of six years in case of audit.

# REQUEST FOR ADVANCE OR REIMBURSEMENT

(See instructions on back)

OMB APPROVAL NO. PAGE 1 OF 1 PAGES  
0348-0004

1. TYPE OF PAYMENT REQUESTED	a. "X" one or both boxes <input type="checkbox"/> ADVANCE <input checked="" type="checkbox"/> REIMBURSEMENT  b. "X" the applicable box <input type="checkbox"/> FINAL <input checked="" type="checkbox"/> PARTIAL	2. BASIS OF REQUEST <input checked="" type="checkbox"/> CASH <input type="checkbox"/> ACCRUAL
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3. FEDERAL SPONSORING AGENCY AND ORGANIZATION ELEMENT TO WHICH THIS REPORT IS SUBMITTED  <b>National Park Service, National Trails-Intermountain</b>	4. FEDERAL GRANT OR OTHER IDENTIFYING NUMBER ASSIGNED BY FEDERAL AGENCY  <b>Enter your agreement no.</b>	5. PARTIAL PAYMENT REQUEST NUMBER FOR THIS REQUEST  <b>ENTER NUMBER (1, 2, etc. as appropriater)</b>
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6. EMPLOYER IDENTIFICATION NUMBER  <b>Enter your tax id number</b>	7. RECIPIENT ACCOUNT NUMBER OR IDENTIFYING NUMBER  <b>Leave blank or enter project account number if it helps you keep your billing straight</b>	8. PERIOD COVERED BY THIS REQUEST FROM (month, day, year) <b>(period of performance for this invoice) ENTER DATE</b> TO (month, day, year) <b>ENTER DATE</b>	
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9. RECIPIENT ORGANIZATION Name <b>Your info here</b>  Number and Street <b>Your info here</b>  City, State and ZIP Code <b>Your info here</b>	10. PAYEE (Where check is to be sent if different than item 9) Name <b>blank</b>  Number and Street  City, State and ZIP Code
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## 11. COMPUTATION OF AMOUNT OF REIMBURSEMENTS/ADVANCES REQUESTED

PROGRAMS/FUNCTIONS/ACTIVITIES ▶	(a)	(b)	(c)	(d)
	150 <sup>th</sup> Anniversary Publication Development and Printing	Leave this column blank	Leave this column blank	<b>TOTAL</b>
a. Total program outlays to date (As of date)	Includes reimbursements & matches thru current pay period			Update this each time you submit a reimbursement request
b. Less: Cumulative program income	0 or blank			Your project doesn't generate income, just enter 0
c. Net program outlays (Line a minus line b)	Same as a			Same as a
d. Estimated net cash outlays for advance period	0 or blank			You don't get advances so enter 0
e. Total (Sum of lines c & d)	Same as a			Same as a
f. Non-Federal share of amount on line e	Your cumulative match to date			Cumulative match to date
g. Federal share of amount on line e	Cumulative ccsp amount requested to date, including current request			Cumulative ccsp amount requested to date, including current request
h. Federal payments previously requested	Cumulative reimbursement requests less the current request			Cumulative reimbursement requests less the current request
i. Federal share now requested (Line g minus line h)	Current requested reimbursement amount			Current requested reimbursement amount
j. Advances required by month, when requested by Federal grantor agency for use in making prescheduled advances	1 <sup>st</sup> month	blank		Blank
	2 <sup>nd</sup> month	blank		blank
	3 <sup>rd</sup> month	blank		blank

## 12. ALTERNATE COMPUTATION FOR ADVANCES ONLY **leave this block blank**

a. Estimated Federal cash outlays that will be made during period covered by the advance	NA
b. Less: Estimated balance of Federal cash on hand as of beginning of advance period	NA
c. Amount requested (Line a minus line b)	NA

**13. CERTIFICATION**

I certify that to the best of my knowledge and belief the data on the reverse are correct and that all outlays were made in accordance with the grant conditions or other agreement and that payment is due and has not been previously requested.	SIGNATURE OF AUTHORIZED CERTIFYING  <b>YOU SIGN</b>	DATE REQUEST SUBMITTED  <b>DATE</b>
	TYPED OR PRINTED NAME AND TITLE  <b>Your name</b>	TELEPHONE (AREA CODE, NUMBER, EXTENSION)  <b>Your phone</b>

This space for agency use  
  
I will sign here

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to the Office of Management and Budget, Paper Reduction Project (0348-0004), Washington DC 20503.

**PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET, SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.**

**INSTRUCTIONS**

Please type or print legibly. Items 1, 3, 5, 9, 10, 11e, 11f, 11g, 11i, 12 and 13 are self-explanatory; specific instructions for other items are as follows:

Item	Entry	Item	Entry
2	Indicate whether request is prepared on cash or accrued expenditure basis. All requests for advances shall be prepared on a cash basis.		programs, functions, or activities should be shown in the "total" column on the first page.
4	Enter the Federal grant number, or other identifying number assigned by the Federal sponsoring agency. If the advance or reimbursement is for more than one grant or other agreement, insert N/A; then, show the aggregate amounts. On a separate sheet, list each grant or agreement number and the Federal share of outlays made against the grant or agreement.	11a	Enter in "as of date," the month, day and year of the ending of the accounting period to which this amount applies. Enter program outlays to date (net of refunds, rebates, and discounts), in the appropriate columns. For requests prepared on a cash basis, outlays are the sum of actual cash disbursements for goods and services, the amount of indirect expenses charged, the value of in-kind contributions applied, and the amount of cash advances and payments made to subcontractors and subrecipients. For requests prepared on an accrued expenditure basis, outlays are the sum of the actual cash disbursements, the amount of indirect expenses incurred, and the net increase (or decrease) in the amounts owed by the recipient for goods and other property received and for services performed by employees, contracts, subgrantees and other payees.
6	Enter the employer identification number assigned by the U.S. Internal Revenue Service, or the FICE (institution) code if requested by the Federal agency.		
7	This space is reserved for an account number or other identifying number that may be assigned by the recipient.		
8	Enter the month, day, and year for the beginning and ending of the period covered in this request. If the request is for an advance or for both an advanced and reimbursement, show the period that the advance will cover. If the request is for reimbursement, show the period for which the reimbursement covers.		
Not e:	The Federal sponsoring agencies have the option of requiring recipients to complete items 11 or 12, but not both. Item 12 should be used when only a minimum amount of information is needed to make an advance and outlay information contained in item 11 can be obtained in a timely manner from other reports.	11b	Enter the cumulative cash income received to date, if requests are prepared on a cash basis. For requests prepared on an accrued expenditure basis, enter the cumulative income earned to date. Under either basis, enter only the amount applicable to program income that was required to be used for the project or program by the terms of the grant or other agreement.
11	The purpose of the vertical columns (a), (b), and (c), is to provide space for separate cost breakdowns when a project has been planned and budgeted by program, function, or activity. If additional columns are needed, use as many additional forms as needed and indicate page number in space provided in upper right; however, the summary totals of all	11d	Only when making request for advance payments, enter the total estimated amount of cash outlays that will be made during the period covered by the advance.
		13	Complete the certification before submitting this request.