



Public Schools of North Carolina

# **ELISS Expenditure Reporting and Cash Application for Education Centers (ERaCA) TA Webinar**

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Federal Program Monitoring & Support

# Today's Agenda

- Welcome
- Vendor Electronic Payment Form
- Expenditure Reporting and Cash Application (ERaCA)
  - Submitting Expenditures
  - Utilizing Reports
- Reimbursement Process
- Required Fiscal Documentation
  - How to Submit
  - Samples
- Fiscal Reviews



# Vendor Electronic Payment & Substitute W-9 Forms

- **Electronic Vendor Payment form and Substitute W-9 form** should be completed or revised for your Non-LEA organization to allow financial transactions within the ERaCA system.
- Please email both forms back to [Jennifer.Smith@dpi.nc.gov](mailto:Jennifer.Smith@dpi.nc.gov) and copy [Ed.Stone@dpi.nc.gov](mailto:Ed.Stone@dpi.nc.gov) for processing, identifying Electronic Vendor Form and your ELISS Organization's name in the subject line.



# Vendor Electronic Payment Form

|   |  |   |
|---|--|---|
| <p><b>Office of the State Controller</b><br/> <b>Return to: OSC Support Services Center</b><br/>         Address: 1410 Mail Service Center<br/>         Raleigh, NC 27699-1410<br/>         Email: <a href="mailto:osc.support.services@osc.nc.gov">osc.support.services@osc.nc.gov</a><br/>         Telephone: <a href="tel:919-707-0795">919-707-0795</a></p> |  | <p style="text-align: right;"><b>Vendor Electronic Payment Form</b></p> <p> <input type="checkbox"/> New Add Request<br/> <input type="checkbox"/> Change/Update Existing Account<br/> <input type="checkbox"/> Inactivate Existing Account         </p> <p style="text-align: right;"><b>*Denotes a required field</b></p> |
|---|--|---|

The State of North Carolina offers payees the opportunity to receive payments electronically through U.S. based banks. In addition to having the funds deposited electronically, you will also receive remittance information by e-mail.

**We require you to submit a copy of a voided check, bank statement, or a bank authorization letter on bank letterhead signed by a bank representative for account verification.**

|   |                                      |                                      |                               |                                  |
|---|--------------------------------------|--------------------------------------|-------------------------------|----------------------------------|
| *TAX ID # or SSN                                    | <input type="text"/>                 |                                      |                               |                                  |
| *PAYEE NAME   | <input type="text"/>                 |                                      |                               |                                  |
| *REMITTANCE ADDRESS<br>(AS PRINTED ON YOUR INVOICE) | <input type="text"/><br>STREET       | <input type="text"/><br>SUITE/ROOM # | <input type="text"/><br>STATE | <input type="text"/><br>ZIP CODE |
| *CONTACT  | <input type="text"/><br>CITY         | STATE                                | ZIP CODE                      |                                  |
|   | <input type="text"/><br>NAME & TITLE | <input type="text"/><br>PHONE NUMBER |                               |                                  |

**NEW FINANCIAL INFORMATION**


|                              |                                   |                                  |                      |  |  |  |  |  |  |  |  |
|------------------------------|-----------------------------------|----------------------------------|----------------------|--|--|--|--|--|--|--|--|
| *FINANCIAL INSTITUTION NAME: | <input type="text"/>              |                                  |                      |  |  |  |  |  |  |  |  |
| *NAME ON ACCOUNT:            | <input type="text"/>              |                                  |                      |  |  |  |  |  |  |  |  |
| *NEW ROUTING NUMBER:         | <input type="text"/>              |                                  |                      |  |  |  |  |  |  |  |  |
| *NEW ACCOUNT NUMBER:         | <input type="text"/>              |                                  |                      |  |  |  |  |  |  |  |  |
| *ACCT TYPE:                  | <input type="checkbox"/> Checking | <input type="checkbox"/> Savings | <input type="text"/> |  |  |  |  |  |  |  |  |
| *REMIT E-MAIL ADDRESS        | <input type="text"/>              |                                  |                      |  |  |  |  |  |  |  |  |

**New add requests MUST include contact information for the state agency with which you are doing business.**

|                              |                                      |
|------------------------------|--------------------------------------|
| *North Carolina Agency Name: | *North Carolina Agency Contact Name: |
|------------------------------|--------------------------------------|



# Substitute W-9

|  |  |   |  |   |   |   |                     |  |
|--|--|---|--|---|---|---|---------------------|--|
| REV 01/2019  |  | <b>NC Office of the State Controller</b><br>(IRS Form W-9 will not be accepted in lieu of this form)<br><b>*Denotes a Required Field</b>  |  | <b>STATE OF NORTH CAROLINA</b><br><b>SUBSTITUTE W-9 FORM</b><br><b>Request for Taxpayer Identification Number</b> |   |  |                     |  |
| Section 1 – Taxpayer Identification  | <b>*1.</b> <input type="checkbox"/> Social Security Number (SSN),<br>OR<br><input type="checkbox"/> Employer Identification Number (EIN),<br>OR<br><input type="checkbox"/> Individual Taxpayer Identification Number (ITIN)<br><b>*2.</b> |   | Please select the appropriate Taxpayer Identification Number (EIN, SSN, or ITIN) type and enter your 9-digit ID number. The U.S. Taxpayer Identification Number is being requested per U.S. Tax Law. Failure to provide this information in a timely manner could prevent or delay payment to you or require The State of NC to withhold 24% for backup withholding tax. |   |   |   |                     |  |
|  | (PRESS THE TAB KEY TO ENTER EACH NUMBER)   |   | <b>*4. Legal Name</b> (as shown on your income tax return):  |   | <b>3. Dunn &amp; Bradstreet Universal Numbering System (DUNS)</b> (see instructions)                                      |   |                     |  |
|  | <b>5. Business Name/DBA/Disregarded Entity Name, if different from Legal Name:</b>   |   | (PRESS THE TAB KEY TO ENTER EACH NUMBER)   |   |   |   |                     |  |
|  | <b>Contact Information</b>   |   |  |   |   |   |                     |  |
|  | <b>*6. Legal Address</b><br>(DO NOT TYPE OR WRITE IN THIS FIELD)   |   |  |   | <b>7. Remittance Address</b> (Location specifically used for payment that is different from Legal Address, if applicable) |   |                     |  |
|  | *Address Line 1:   |   |  |   | Address Line 1:   |   |                     |  |
|  | Address Line 2:  |   |  |   | Address Line 2:   |   |                     |  |
|  | *City  |   | *State   | *Zip (9 digit)  |   | City  | State Zip (9 digit) |  |
|  | *County  |   |  |   | County  |   |                     |  |
|  | *8. Contact Name:  |   |  |   |   |   |                     |  |
| *9. Phone Number:  |  |   |  |   |   |   |                     |  |
| 10. Fax Number:  |  |   |  |   |   |   |                     |  |
| 11. Email Address:   |  |   |  |   |   |   |                     |  |
| <b>*12. Entity Type</b>  |  | <b>*13. Entity Classification</b>   |  | <b>14. Exemptions (see instructions)</b>  |   |   |                     |  |
| <input type="checkbox"/> Individual/Sole Proprietor/Single-member LLC <input type="checkbox"/> C-Corporation <input type="checkbox"/> S-Corporation<br><input type="checkbox"/> Partnership <input type="checkbox"/> Trust/Estate <input type="checkbox"/> Other _____<br><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) _____   |  | <input type="checkbox"/> Medical Services<br><input type="checkbox"/> Legal/Attorney Services<br><input type="checkbox"/> NC Local Govt<br><input type="checkbox"/> Federal Govt<br><input type="checkbox"/> NC State Agency<br><input type="checkbox"/> Other Govt<br><input type="checkbox"/> Other (specify) _____ |  | Exempt payee code (if any):<br><br>Exemption from FATCA reporting code (if any):                                  |   |   |                     |  |
| <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. |  |   |  |   |   |   |                     |  |
| Under penalties of perjury, I certify that:  |  |   |  |   |   |   |                     |  |
| 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and<br>2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service  |  |   |  |   |   |   |                     |  |



# Logging Into ERaCA

ERaCA - Expenditure Reporting and Cash Application for Education Centers



1. Enter NCID username
2. Enter NCID Password
3. Click Login button

User Name

Password

If you have forgotten your username or password,  
Please go to the NCID website, <https://ncid.nc.gov>, to retrieve/reset your login information.

**This is a closed site.** Access is restricted to authorized school and LEA personnel. If you have been assigned a username and password, enter them appropriately to proceed to the site.



**NOTE** All information entered into this system may be viewed by authorized personnel in your local school system and by the North Carolina Department of Public Instruction.



# ERaCA Welcome Screen



ERaCA - Expenditure Reporting and  
Cash Application for Education Centers

michael\_ray Logout

Welcome

Expenditure Data Entry

Inquiry Submitted Data

Reports

Manage Permissions

Admin

PRC Unit Enable/Disable

Help

Home

Welcome  
(DPI)

## ERaCA System Welcome Screen

\*\*\*\*The ERaCA system is a web-based application designed to automatically process expenditures and cash requests, for all Non-LEA units. The system will allow the non-units to view financial reports, previously submitted requests and see available balances online. The system eliminates the need for the manually entry process, which increases data integrity and ensures the timely processing of all submitted requests.

For additional system support, visit the NCDPI Financial and Business Services website by clicking this link:

<https://www.dpi.nc.gov/districts-schools/district-operations/financial-and-business-services/school-district-finance-operations/education-centers-eraca>.

If you have any problems while using the ERaCA system, please contact the support center by submitting a ticket through the ServiceNow Portal at:

[https://ncgov.service-now.com/sp\\_dpi](https://ncgov.service-now.com/sp_dpi) or by calling 919.716.1840 M-F 7am-4pm

For additional support, regarding budget and financial information (i.e. program start date, budget amendments, budget approvals, available balance discrepancies, dollars per child, purchase requirements, etc...) contact your designated program consultant by clicking the following link:

<https://www.dpi.nc.gov/districts-schools/federal-program-monitoring/21st-century-community-learning-centers#21st-cclc-directory/>

If you have any questions regarding your request, please check the help screen first. If the answer to your question is not on the help screen, please send an email with ERaCA as the subject to [systems\\_accounting@dpi.nc.gov](mailto:systems_accounting@dpi.nc.gov) and your question will be routed to the appropriate section, please include your Non-Unit number in the email.

Please make sure you review the following reports on a monthly basis:

JHA305 - Budget Balance Reconciliation Report

JHA314EG - Cash Balance Report (both Month-to-date and Year-to-date sections)

### NOTE:

DPI processes expenditures each weekday at 3:00 PM except for holidays. All request submitted after 3:00 PM will be processed the following day.

You cannot submit another request for the same PRC until your first request has been processed.

### PLEASE NOTE:

- All information entered / viewed using this system may be viewed by NCDPI and authorized personnel in your local school system.
- DO NOT share your user id or password with anyone.
- Make sure you log out of the application completely when your computer is unattended or when you have finished using the system.



Public Schools of North Carolina

# Entering Expenditures

Click on the Expenditure Tab



Home > Expenditure/Cash Request Data Entry

Welcome Expenditure Data Entry Inquiry Submitted Data Reports Manage Permissions Admin PRC Unit Enable/Disable Help

Federal Programs  
Expenditure/Cash Request Data Entry Screen  
Date : 10/26/2017

Fiscal Year : 2018  
Unit Number : 996-NC Dept of Corrections  
Program Report Code : 047 - Delinquent Youth in State Agency Facilities Fund : Federal  
List All Accounts :  Yes  No (Only Submitted Accounts)

| Account Description                                     | Account Code | Expenditure |
|---|--------------|-------------|
| Remedial & Suppl K-12 - Contracted Services             | 5330-047-311 |             |
| Remedial & Suppl K-12 - Employer's Hospitalization Ins  | 5330-047-231 |             |
| Remedial & Suppl K-12 - Employer's Retirement - Regular | 5330-047-221 |             |
| Remedial & Suppl K-12 - Employer's Soc Sec - Regular    | 5330-047-211 |             |
| Remedial & Suppl K-12 - Salary - Teacher                | 5330-047-121 |             |

row(s) 1 - 5 of 5  
Cancel Save

Expenditure Total for Program : 047 Total : \$0.00  
ATS Amount : \$364,375.14

Request Cash  Yes  No Cash Request Amount : \$0.00  
ATD Amount : \$364,375.14

**Note: DPI processes expenditures each weekday at 3:00 PM except for holidays. All requests submitted after 3:00 PM will be processed the following day. You cannot submit another request for the same PRC until your first request has been processed.**

PRC 133

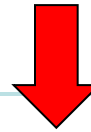
1. Click on the drop down box and select the appropriate Program Report Code associated with expenditure.
2. Enter the dollar amount of the expenditure.
3. After entering the expenditures, click the save button.
4. You may not enter an amount greater than your ATS or ATD amount.





# Submitting Expenditures

Click on the Expenditure Tab



Home > Expenditure/Cash Request Data Entry

Welcome | **Expenditure Data Entry** | Inquiry Submitted Data | Reports | Help

Data Updated/Saved Successfully! x 1

Federal Programs  
Expenditure/Cash Request Data Entry Screen  
Date : 05/14/2010

Unit Number : 201-Office of Juvenile Justice  
Fiscal Year : 2010  
Program Report Code : 044 - IDEA VI-B Capacity Building and Improvement

Submit 2

| Account Description                 | Account Code | Expenditure |
|-------------------------------------|--------------|-------------|
| EC - Salary - Tutor                 | 5210-044-143 | \$500.65    |
| EC - Employer's Life Insurance Cost | 5210-044-235 | \$25.98     |
| EC - Workshop Exp/Allowable Travel  | 5210-044-312 | \$100.00    |
| EC - Travel Reimbursement           | 5210-044-332 | \$46.57     |
| EC - Supplies and Materials         | 5210-044-411 | \$98.65     |

row(s) 1 - 5 of 5

Add COA Accounts Cancel Save

Expenditure Total for Program : 044 Total : \$771.85  
ATS Amount : \$4,456.42

Request Cash  Yes  No Cash Request Amount : \$771.85  
ATD Amount : \$4,456.42

3

After "saving" the data, you should see the following message.

The "submit" tab will become active, only after you have "saved" the expenditure data.

You must click the "submit" button to send the Expenditure and Cash Request to DPI.

Please verify all expenditure and cash request information is correct before clicking "submit"

1. After saving the data you will get the following message: **Data Update Saved Successfully**
2. The **submit** tab will only become active after the data have been saved.
3. Verify all expenditures and cash request is correct before clicking submit.
4. Click the submit button to send the expenditure and cash request to DPI.

**Note:** DPI processes expenditures each weekday at 3:00 PM except for holidays. All requests submitted after 3:00 PM will be processed the following day. You cannot submit another request for the same PRC until your first request has been processed.



# Confirming Expenditures



You will not be able to make any changes to this request if you click "YES".

Are you sure you want to submit the following expenditures and cash request?

Federal Programs

Expenditure/Cash Request Data Entry Screen

Date : 05/14/2010

Unit Number : 201

Fiscal Year : 2010

Program Request Code : 044

| Account Description                 | Account Code | Expenditure |
|-------------------------------------|--------------|-------------|
| EC - Salary - Tutor                 | 5210-044-143 | \$500.65    |
| EC - Employer's Life Insurance Cost | 5210-044-235 | \$25.98     |
| EC - Workshop Exp/Allowable Travel  | 5210-044-312 | \$100.00    |
| EC - Travel Reimbursement           | 5210-044-332 | \$46.57     |
| EC - Supplies and Materials         | 5210-044-411 | \$98.65     |

row(s) 1 - 5 of 5

Expenditure Total for Program : 044 Total : \$771.85  
ATS Amount : \$4,456.42

Request Cash : Y Cash Request Amount : \$771.85  
ATD Amount : \$4,456.42

Transmissions will only be processed once a month for each program report code (PRC)!

1

This is the screen you will see after clicking the "submit" button. Please read it carefully!

1. Please read carefully
2. Verify all information is correct. If changes need to be made, select **"No, Don't Submit."** You will be given the opportunity to make corrections. If everything is correct, click **"Yes, Submit..."** and the request will be sent to DPI.

2

You must verify that all the information is correct. If changes need to be made, select "No, Don't Submit"...you will then be given the opportunity to make corrections. If everything is correct, click "Yes, Submit..." and the request will be sent to DPI.



# Correcting Expenditures

Home > Expenditure/Cash Request Data Entry

Welcome Expenditure Data Entry Inquiry Submitted Data Reports Help

Federal Programs  
Expenditure/Cash Request Data Entry Screen  
Date : 05/14/2010

Unit Number : 201-Office of Juvenile Justice  
Fiscal Year : 2010  
Program Report Code : 044 - IDEA VI-B Capacity Building and Improvement

Submit

| Account Description                 | Account Code ▲ | Expenditure |
|-------------------------------------|----------------|-------------|
| EC - Salary - Tutor                 | 5210-044-143   | \$500.65    |
| EC - Employer's Life Insurance Cost | 5210-044-235   | \$25.98     |
| EC - Workshop Exp/Allowable Travel  | 5210-044-312   | \$100.00    |
| EC - Travel Reimbursement           | 5210-044-332   | \$46.57     |
| EC - Supplies and Materials         | 5210-044-411   | \$98.65     |

row(s) 1 - 5 of 5

Add COA Accounts Cancel Save

Expenditure Total for Program : 044 Total : \$771.85  
ATS Amount : \$4,456.42

Request Cash  Yes  No Cash Request Amount : \$771.85  
ATD Amount : \$4,456.42

**Note:** DPI processes expenditures each weekday at 3:00 PM except for holidays. All requests submitted after 3:00 PM will be processed the following day. You cannot submit another request for the same PRC until your first request has been processed.

1. If you select, **“No, Don't Submit”**, you will be brought back to this screen to make changes.
2. You must select **“save”** after making changes before you can **“submit”** updated data



# Confirming Data Successfully Submitted

Home > Expenditure/Cash Request Data Entry

Welcome Expenditure Data Entry Inquiry Submitted Data Reports Help

Submitted data successfully!

Federal Programs  
Expenditure/Cash Request Data Entry Screen  
Date : 05/14/2010

Unit Number : 201-Office of Juvenile Justice  
Fiscal Year : 2010  
Program Report Code : 044 - IDEA VI-B Capacity Building and Improvement

| Account Description                 | Account Code | Expenditure |
|-------------------------------------|--------------|-------------|
| EC - Salary - Tutor                 | 5210-044-143 | \$500.65    |
| EC - Employer's Life Insurance Cost | 5210-044-235 | \$25.98     |
| EC - Workshop Exp/Allowable Travel  | 5210-044-312 | \$100.00    |
| EC - Travel Reimbursement           | 5210-044-332 | \$46.57     |
| EC - Supplies and Materials         | 5210-044-411 | \$98.65     |

row(s) 1 - 5 of 5

Cancel

Expenditure Total for Program : 044 Total : \$771.85  
ATS Amount : \$4,456.42

Request Cash  Yes  No Cash Request Amount : \$771.85  
ATD Amount : \$4,456.42

**Note:** DPI processes expenditures each weekday at 3:00 PM except for holidays. All requests submitted after 3:00 PM will be processed the following day. You cannot submit another request for the same PRC until your first request has been processed.

1

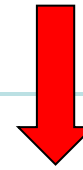
1. After selecting “Yes, Submit...”, you will see this message

2. **Reminder:** DPI processes expenditures each weekday at 3:00 PM except for holidays. All requests submitted after 3:00 PM will be processed the following day. You cannot submit another request for the same PRC until your first request has been processed.

2



# Inquiry Submitted Tab



Click on the Inquiry Submitted Tab



Home > Inquiry Submitted Data

## Federal Programs

### Expenditure/Cash Request Data Inquiry Screen

Fiscal Year: 2010  
Calendar Month: June  
Submitted Date: 06/08/2010  
Unit Number: 217 - N C Dept of Corrections  
Program Report Code: 050 - ESEA Title 1 - LEA Basic Program (Transferability In Only) Fund: Federal  
Submitted Time: 11:55 am  
Submitted Status: P

| Account Description                                      | Account Code | Expenditure |
|--|--------------|-------------|
| Remedial & Suppl K-12 - Salary - Teacher                 | 5330-050-121 | \$23,915.84 |
| Remedial & Suppl K-12 - Employer's Soc Sec - Regular     | 5330-050-211 | \$1,755.49  |
| Remedial & Suppl K-12 - Employer's Retirement - Regular  | 5330-050-221 | \$2,083.90  |
| Remedial & Suppl K-12 - Employer's Hospitalization Ins   | 5330-050-231 | \$1,886.10  |
| Remedial & Suppl K-12 - Workshop Exp/Allowable Travel    | 5330-050-312 | \$380.58    |
| Remedial & Suppl K-12 - Supplies and Materials           | 5330-050-411 | \$3,341.39  |
| Remedial & Suppl K-12 - Computer Software and Supplies   | 5330-050-418 | \$769.45    |
| Remedial & Suppl K-12 - Equipment Purchase - Capitalized | 5330-050-541 | \$2,310.76  |

row(s) 1 - 8 of 8

Expenditure Total for Program : 050 Total : \$36,443.51  
ATS\_Amount : \$69,031.02

Request Cash  Yes  No Cash Request Amount : \$0.00

ATD Amount : \$69,031.02 Fund Requirement Date :

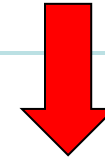
Cash Request is **Approved**  
Amount : \$36,443.51

1. Change the calendar month to the month you would like to view
2. If you have submitted multiple PRC's, use the drop-down box to see what was submitted in each PRC
3. Note your ATS and ATD amounts will NOT change until after your cash request has been processed.
4. The Fund Requirement Date will not be populated until DPI process your request. Once DPI processes the request, the Fund Requirement Date will show.

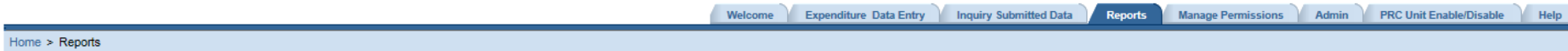
Funds are deposited *typically* 7-10 business days after Submission



# Accessing Reports



**Click on the  
Reports Tab**



## List of Reports

- Cash Request Report By FRD Date
- Cash Request Report By Unit Number
- Federal Expenditures Report - JHA305EG
- Federal Cash Balance Report - JHA314EG
- State Funds Available Report - JHA372EG

Click on a link to see a detailed report for your unit



# Accessing Reports

Fiscal Year: 2020 ▼

Cash Requests by Unit Number: [REDACTED]

Rows 50

PRC # : 110

| LEA #      | Fund Code | Frd Date  | Cash Request Amount | Submitted Date |
|------------|-----------|-----------|---------------------|----------------|
| [REDACTED] | Federal   | 24-JUL-19 | \$12,034.31         | 07/18/2019     |
| [REDACTED] | Federal   | 09-AUG-19 | \$29,630.04         | 08/04/2019     |
| [REDACTED] | Federal   | 28-AUG-19 | \$16,801.47         | 08/21/2019     |
| [REDACTED] | Federal   | 27-SEP-19 | \$20,643.37         | 09/23/2019     |
| [REDACTED] | Federal   | 14-NOV-19 | \$20,390.57         | 11/07/2019     |
| [REDACTED] | Federal   | 09-DEC-19 | \$19,209.91         | 12/03/2019     |
| [REDACTED] | Federal   | 31-DEC-19 | \$9,095.41          | 12/19/2019     |
| [REDACTED] | Federal   | 16-JAN-20 | \$12,139.69         | 01/09/2020     |
| [REDACTED] | Federal   | 11-FEB-20 | \$11,235.19         | 02/04/2020     |
| [REDACTED] | Federal   | 26-FEB-20 | \$17,139.35         | 02/20/2020     |
| [REDACTED] | Federal   | 24-MAR-20 | \$19,517.60         | 03/18/2020     |
| [REDACTED] | Federal   | 09-APR-20 | \$5,123.54          | 04/02/2020     |
| [REDACTED] | Federal   | 27-APR-20 | \$9,406.52          | 04/20/2020     |
| [REDACTED] | Federal   | 07-MAY-20 | \$9,133.83          | 04/29/2020     |
| [REDACTED] | Federal   | 20-MAY-20 | \$10,649.48         | 05/14/2020     |
| [REDACTED] | Federal   | 08-JUN-20 | \$12,857.44         | 06/02/2020     |
| [REDACTED] | Federal   | 17-JUN-20 | \$11,238.60         | 06/11/2020     |
|            |           |           | <b>\$246,246.32</b> |                |

1 - 17 of 17

## Sample Cash Request Report By Unit Number

# Accessing Reports

## Sample Federal Expenditures Report

Home > Reports > Report Selection > Report Display

|                                 |                 |                                      |               |                   |                |                       |                   |
|---------------------------------|-----------------|--------------------------------------|---------------|-------------------|----------------|-----------------------|-------------------|
| N.C. DEPT OF PUBLIC INSTRUCTION |                 | FEDERAL PROGRAMS                     |               |                   |                | PROG:                 | JHA305EG          |
| DATE RUN: 12/13/19              |                 | BUDGET BALANCE RECONCILIATION REPORT |               |                   |                | REPORT:               | R01               |
| TIME RUN: 16:04:11              |                 | FOR NOVEMBER , 2019                  |               |                   |                | ----                  | 162               |
| UNIT NUMBER                     | 011             | PROGRAM REPORT CODE                  |               |                   |                | 133                   | ELISS             |
| ACCOUNT CODE                    | Y-T-D<br>BUDGET | TRANS<br>AMOUNT                      | TRANS<br>TYPE | VOUCHER<br>NUMBER | SOURCE<br>CODE | Y-T-D<br>EXPENDITURES | BUDGET<br>BALANCE |
| 5350-113                        | \$ .00          | \$5,605.25                           |               |                   | FN02000001     | \$20,628.75           | (\$20,628.75)     |
| 5350-196                        | \$ .00          | \$ .00                               |               |                   |                | \$771.87              | (\$771.87)        |
| 5350-198                        | \$ .00          | \$13,436.63                          |               |                   | FN02000002     | \$59,783.37           | (\$59,783.37)     |
| 5350-211                        | \$ .00          | \$1,309.28                           |               |                   | FN02000003     | \$5,736.82            | (\$5,736.82)      |
| 5350-232                        | \$ .00          | \$4,207.56                           |               |                   | FN02000004     | \$4,207.56            | (\$4,207.56)      |
| 5350-311                        | \$ .00          | \$386.00                             |               |                   | FN02000005     | \$2,095.00            | (\$2,095.00)      |
| 5350-327                        | \$ .00          | \$2,000.00                           |               |                   | FN02000006     | \$4,000.00            | (\$4,000.00)      |
| 5350-333                        | \$ .00          | \$ .00                               |               |                   |                | \$6,240.53            | (\$6,240.53)      |
| 5350-411                        | \$ .00          | \$1,175.90                           |               |                   | FN02000007     | \$3,093.86            | (\$3,093.86)      |
| 5880-131                        | \$ .00          | \$3,240.50                           |               |                   | FN02000008     | \$12,971.50           | (\$12,971.50)     |
| 5880-211                        | \$ .00          | \$247.90                             |               |                   | FN02000009     | \$992.33              | (\$992.33)        |
| 6300-113                        | \$ .00          | \$4,048.00                           |               |                   | FN02000010     | \$13,305.50           | (\$13,305.50)     |
| 6300-211                        | \$ .00          | \$309.67                             |               |                   | FN02000011     | \$1,017.87            | (\$1,017.87)      |
| 6300-311                        | \$ .00          | \$200.00                             |               |                   | FN02000012     | \$800.00              | (\$800.00)        |
| 6550-311                        | \$ .00          | \$24.60                              |               |                   | FN02000013     | \$2,840.76            | (\$2,840.76)      |
| 6550-331                        | \$ .00          | \$ .00                               |               |                   |                | \$1,476.59            | (\$1,476.59)      |
| 8100-392                        | \$ .00          | \$1,036.47                           |               |                   | FN02000014     | \$1,036.47            | (\$1,036.47)      |
| 8200-399                        | \$239,771.02    | \$ .00                               |               |                   | BA03000888     | \$ .00                | \$239,771.02      |
|                                 | =====           | =====                                |               |                   |                | =====                 | =====             |
| PRC TOTALS:                     | \$239,771.02    | \$37,227.76                          |               |                   |                | \$140,998.78          | \$98,772.24       |
| UNIT TOTALS:                    | \$239,771.02    | \$37,227.76                          |               |                   |                | \$140,998.78          | \$98,772.24       |



# Accessing Reports

## Sample Federal Cash Balance Report

Home > Reports > Report Selection > Report Display

N.C. DEPT OF PUBLIC INSTRUCTION  
DATE RUN: 07/15/20  
TIME RUN: 16:04:34  
UNIT NUMBER

FEDERAL PROGRAMS  
CASH BALANCE REPORT -- MTD BY LEA  
AS OF 06292020

PROG: JHA314EG  
REPORT: R03  
PAGE: 158

| PRC          | PROGRAM DESCRIPTION | UNIT<br>BEGINNING<br>CASH BALANCE | MTD***<br>CERTIFICATIONS | NET MTD**<br>EXPENDITURES | UNIT<br>ENDING<br>CASH BALANCE | ERROR<br>FLAG* |
|--------------|---------------------|-----------------------------------|--------------------------|---------------------------|--------------------------------|----------------|
| 133          | ELISS               | .00                               | 47,869.90                | 47,869.90                 | .00                            |                |
| UNIT TOTALS: |                     | .00                               | 47,869.90                | 47,869.90                 | .00                            |                |

|   |
|---|
| REMAINING<br>CASH AVAILABLE<br>TO REQUEST |
| 122,014.05                                |

\* - IN ERROR FLAG COLUMN INDICATES THAT CALCULATED CASH BALANCE IS NOT EQUAL TO THE CASH ADVANCE BALANCE.  
\*\*NOTE: MTD EXPENDITURES ON THIS REPORT REFLECT ACTUAL CASH ACTIVITY. THE ACCRUAL REVERSAL ENTRIES ARE IGNORED.  
ACCRUAL FIGURES, IN AN EFFORT TO REFLECT CASH ACTIVITY.  
\*\*\* CERTIFICATIONS INCLUDE REFUNDS FOR PRIOR YEAR OVERSPENT PROJECTS.





## ERaCA - Expenditure Reporting and Cash Application for Education Centers

### Help

**Common Issues in ERaCA. Click the "+" sign to expand for solution.**

- ▼ [1. I cannot access ERaCA](#)
- ▼ [2. How to request NCID](#)
- ▼ [3. I forgot my username and password](#)
- ▼ [4. I have not received my funds](#)
- ▼ [5. I cannot request my funds](#)
- ▼ [6. I do not see my funds](#)
- ▼ [7. I submitted my request and realized I made a mistake](#)
- ▼ [Contacts](#)

**Display/Print/Download the ERaCA's help document. it will take a while!**

# Documentation Required for Reimbursement

- NCDPI is **requiring all Non-LEAs to submit for reimbursement in the ERaCA system at least once monthly after program starts**
- ERaCA Reconciliation Cover Sheet
  - Dated, Signed by Chief Admin/Fiscal Agent
- Expenditures/Cash Request Data Inquiry Screen
  - Documentation should follow order of the printout



# ERaCA Reconciliation Cover Sheet

ERaCA Reconciliation Cover Sheet (Rev. July 31, 2020)

|   |                       |  |
|---|-----------------------|--|
| + | ORGANIZATION NAME     |  |
|   | UNIT NUMBER           |  |
|   | AMOUNT REQUESTED      |  |
|   | ERaCA SUBMISSION DATE |  |


|  |      |
|--|------|
| I attest that the organization is submitting accurate and complete information for this reimbursement request.             |      |
| Signature of Fiscal Agent Organization Chief Administrator for the Non-LEA as Listed in the Basic Program Information Form | Date |

Send Documentation to [RICHARD.TRANTHAM@DPI.NC.GOV](mailto:RICHARD.TRANTHAM@DPI.NC.GOV)

\*Documentation must be received within 10 business days of the ERaCA submission to avoid disablement of ELISS funds.



# Expenditure/Cash Request Data Inquiry



ERaCA - Expenditure Reporting and Cash Application for Education Centers

[anita\\_ja@ncps.org](#) | [Logout](#)

Welcome
Inquiry Submitted Date
Reports
PRG Unit Enable/Disable
Help

Home > Inquiry Submitted Date

---

**Federal Programs**

**Expenditure/Cash Request Data Inquiry Screen**

Fiscal Year: 2020  
 Calendar Month: March  
 Submitted Date: 03/02/2020  
 Unit Number:  
 Program Report Code: 110 - Title IV - 21st Century Community Learning Ctr  
 Fund: Federal  
 Submitted Time: 07:17 pm  
 Submitted Status: P

| Account Description  | Account Code | Expenditure |
|--|--------------|-------------|
| Extended Day/Year Instr - Tutorial Pay                           | 5350-110-198 | \$4,996.50  |
| Extended Day/Year Instr - Employer's Soc Sec - Regular           | 5350-110-211 | \$415.56    |
| Extended Day/Year Instr - Advertising Cost                       | 5350-110-313 | \$203.88    |
| Extended Day/Year Instr - Travel Reimbursement                   | 5350-110-332 | \$3,259.77  |
| Alternative Progs Support & Dev - Salary - Director and/or Super | 6300-110-113 | \$875.00    |
| Alternative Progs Support & Dev - Employer's Soc Sec - Regular   | 6300-110-211 | \$33.80     |
| Alternative Progs Support & De - Contracted Services             | 6300-110-311 | \$81.45     |

row(s) 1 - 7 of 7

Expenditure Total for Program : 110      Total : **\$9,869.96**  
 ATS\_Amount : \$63,714.56

Request Cash  Yes      Cash Request Amount : **\$9,869.96**  
 No

ATD Amount : \$70,712.21      Fund Requirement Date : 03/09/2020

Cash Request is Approved  
 Amount : \$9,869.96



# Documentation Required for Reimbursement

- Payroll
- Timesheets (signed, dated, showing work activities, attestation, account codes)
- Receipts (dates, account codes, management approval)
- Invoices (should match approved contracts)
- Account ledgers (reconciliation worksheet corresponding to submitted request)



# Sample Documentation

| 21st CENTURY COMMUNITY LEARNING CENTERS<br>Actual Expenditures February 15 - 29, 2020   |              |              |           |                |               |                        |
|---|--------------|--------------|-----------|----------------|---------------|------------------------|
| Organization Name (enter in shaded cell below)  | Unit Number  |              |           |                | Cohort Number |                        |
|   |              |              |           |                | 12            |                        |
| Project Period  | Beginning    |              |           |                | End           |                        |
|   |              |              |           |                | 07/01/19      |                        |
|   |              |              |           |                | 09/30/20      |                        |
| Expenditure Categories  | Codes        | Date Act Exp | Date Paid | Date Eraca Sub | Actuals Total | Comments               |
| Alt Progs Support & Dev Svcs - Salary - Director and/or Supervisor  | 6300.110.113 | 2/16 - 2/29  | 2/29/2019 | 3/2/2020       | \$875.00      |                        |
| Alt Progs Support & Dev Svcs - Employer's Soc Sec - Regular   | 6300.110.211 | 2/16 - 2/29  | 2/29/2019 | 3/2/2020       | \$33.80       |                        |
| Alternative Progs Support & Dev Services- Contracted Services (if working in administrative capacity)                                     | 6300.110.311 | 2/16 - 2/29  | 2/29/2019 | 3/2/2020       | \$83.45       | Payroll Processing Fee |
| *Note* Administrative costs are limited to 12% of the yearly budget; all codes above this line are considered administrative in function. |              |              |           |                |               |                        |
| <b>Total</b>  |              |              |           |                | \$992.25      |                        |
| Extended Day/Year Instr - Tutorial Pay  | 5350.110.198 | 2/16 - 2/29  | 2/29/2019 | 3/2/2020       | \$4,998.50    |                        |
| Extended Day/Year Instr - Overtime Pay  | 5350.110.199 | 2/16 - 2/29  | 2/29/2019 | 3/2/2020       | \$0.00        |                        |
| Extended Day/Year Instr - Employer's Soc Sec - Regular  | 5350.110.211 | 2/16 - 2/29  | 2/29/2019 | 3/2/2020       | \$415.56      |                        |
| Extended Day/Year Instr - Advertising Cost  | 5350.110.313 |              |           | 3/2/2020       | \$203.88      | Website Hosting        |
| Extended Day/Year Instr - Travel Reimbursement  | 5350.110.332 | 2/16 - 2/29  | 2/29/2019 | 3/2/2020       | \$3,259.77    | Beyond Conference, ATL |
|   |              |              |           |                | \$9,869.96    |                        |

|   | 5350-110-198 | 5350-110-211 | 5350-110-311 | 5350-110-312      |
|---|--------------|--------------|--------------|-------------------|
| Extended Day/Year Instr - Tutorial Pay                  | \$5,630.77   | payroll1     | payment1     | invoice1 receipt1 |
| Extended Day/Year Instr - Employer's Soc Sec - Regular  | \$ 430.46    | payroll2     | payment2     | invoice2 receipt2 |
| Extended Day/Year Instr - Contracted Services           | \$ 380.00    | payroll3     | payment3     | invoice3 receipt3 |
| Extended Day/Year Instr - Workshop Exp/Allowable Travel | \$ 467.59    | payroll4     | payment4     | invoice4 receipt4 |
|   |              | etc          | etc          | etc etc           |

Must provide Proof of Payment (POP) - cancelled checks (front/back), bank statements, credit card statements. All documentation should be reviewed and initialed by the Program Director/Management-level personnel.

SAMPLE

22/4/2020 My Account | Manage your Billing

**GoDaddy**  
CONTACT US 24/7 400-505-8677

## Receipt

DATE: Dec 31, 2019, 10:52 AM

CUSTOMER #:

BILL TO:

PAYMENT: \$224.87

Previous Balance \$224.87

Received Payment \$224.87

Balance Due (USD) \$0.00

| Term               | Product                                      | Amount          |
|--------------------|--|-----------------|
| 1 mo               | Ultimate Hosting Secure Linux Renewal        | \$203.88        |
| 1 yr               | * Ultimate Linux Hosting with cPanel Renewal | \$210.99        |
| 1 mo               | Premium Cash Parking Renewal                 | \$10.00         |
| <b>Total (USD)</b> |  | <b>\$224.87</b> |

REFERENCE

*pd check 1224*







# Sample Timesheet Continued

## Community Kids Staff Timesheet

GRAND TOTAL (MONTHLY): \_\_\_\_\_

I, \_\_\_\_\_, certify that I spent 100% of my time on the 21<sup>st</sup> CCLC attendance percentage for the month of \_\_\_\_\_, 2020, on 21<sup>st</sup> Century Activities.

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date

I have reviewed all entries on this timesheet and approve that this staff member has spend 100% of their 21<sup>st</sup> CCLC attendance time for the month of \_\_\_\_\_, 2020, on 21<sup>st</sup> Century Activities.

\_\_\_\_\_  
Director Signature

\_\_\_\_\_  
Date



# Documentation: Invoice Example

## Company Name

[Street Address]  
[City, ST ZIP]  
Phone: [000-000-0000]  
Fax: [000-000-0000]  
Website: somedomain.com

## INVOICE

|             |           |
|-------------|-----------|
| DATE        | 12/9/2019 |
| INVOICE #   | [123456]  |
| CUSTOMER ID | [123]     |
| DUE DATE    | 1/8/2020  |

### BILL TO

[Name]  
[Company Name]  
[Street Address]  
[City, ST ZIP]  
[Phone]

| DESCRIPTION                 | TAXED | AMOUNT |
|-----------------------------|-------|--------|
| [Service Fee]               |       | 230.00 |
| [Labor: 5 hours at \$75/hr] |       | 375.00 |
| [Parts]                     | X     | 345.00 |
|                             |       |        |
|                             |       |        |
|                             |       |        |
|                             |       |        |
|                             |       |        |
|                             |       |        |
|                             |       |        |

### OTHER COMMENTS

1. Total payment due in 30 days
2. Please include the invoice number on your check

|              |                  |
|--------------|------------------|
| Subtotal     | 950.00           |
| Taxable      | 345.00           |
| Tax rate     | 6.250%           |
| Tax due      | 21.56            |
| Other        | -                |
| <b>TOTAL</b> | <b>\$ 971.56</b> |

Make all checks payable to  
[Your Company Name]

If you have any questions about this invoice, please contact  
[Name, Phone #, E-mail]

**Thank You For Your Business!**





Public Schools of North Carolina

# Fiscal Reviews

Jennifer Smith, Program Administrator  
Federal Program and Monitoring Division

# ELISS Fiscal Reviews

- NC DPI and the Federal Program Monitoring and Support Division maintains responsibility and oversight for fiscal monitoring of the ELISS program



# ELISS Fiscal Reviews

- CFR§200.331 (d) - All pass-through entities must monitor the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, in compliance with Federal statutes, regulations, and the terms and conditions of the subaward



# Required Report on Use of Funds

- *“Each State agency or department that receives federal grant funds under Section 4.1 of this act shall provide a report to the Joint Legislative Commission on Governmental Operations and the Fiscal Research Division no later than 90 days from the day the grant period ends detailing the use of funds. The report....shall include the amount of funds allocated to each State agency, State department, and nonprofit organization; how the funds were used by each State agency, State department, and nonprofit organization; and the amount of funds allocated to each State agency, State department, and nonprofit organization that remained unspent as of December 30, 2020. The report required from each State agency or department that receives federal grant funds under Section 4.1 of this act shall include the amount of funds granted, the source of the funds, how the funds were used, and the amount of funds that remained unspent at the end of the grant period. ” [Session Law 2020-4, SECTION 1.7}*



# Who will be Conducting Fiscal Reviews?

- Since 2013, NCDPI has experience in contracting with independent compliance monitoring firms through state convenience contracts to conduct on-site fiscal reviews utilizing a Fiscal Review (FR) instrument developed by NCDPI.
- FPMS is currently seeking bids from outside Accounting Firms to managing the Fiscal Reviews of ELISS grantees due to the limited internal staffing capacity to conduct these reviews



# Which Organizations Will Receive a Fiscal Review?

- This is currently unknown since we have not received bids at this time to know the Scope of Work Possible within the funds FPMS has to expend on the contract
- If only a portion of the 27 organizations can be reviewed, the selected organizations would be chosen via random selection





# When Would the Fiscal Review Occur?

- Due to the time it takes for NCDPI to follow the bid and procurement process and submit contracts for review and approval, the exact starting date or timeline for Fiscal Reviews is currently unknown
- Due to the limited Period of Availability of these grant funds (July 1, 2020- December 30, 2020) there is a likelihood that some organizations might receive a Fiscal Review AFTER the grant program ends on December 30, 2020



# How Should We Prepare for a Possibly Fiscal Review?

- In preparation for a possible on-site fiscal review for selected ELISS programs, NCDPI is requesting that documentation (receipts, payroll record, timesheets, etc.), as well as any inventory, be maintained and readily available to compliance monitoring personnel for review.



# ELISS Written Fiscal Procedures

- Each organization must establish and maintain effective fiscal control and fund accounting procedures (internal controls) over the Federal award that provide reasonable assurance that the organization is compliant in managing the Federal award



# ELISS Written Fiscal Procedures

- Written Procedures/Internal Controls should address the following:
  - Effective control and accountability of funds
  - Transactions must be properly recorded & supported with proper documentation
  - Subgrantees must maintain certified time & effort documentation



# ELISS Written Fiscal Procedures

- Cash management processes
  - Written procedures for ERaCA submissions
- Allowability of Funds
- Conflict of Interest
- Bid & Procurement Process
- Travel
- Segregation of Duties





Public Schools of North Carolina

# Grant Guidance Document



Public Schools of North Carolina

**Questions?**