New Hampshire State Conservation Committee Conservation Grant Program Invoice Form Instructions

Instructions

- A Certificate of Insurance with a current date must be on file with the State Conservation Committee.

 An updated Certificate of Insurance may be mailed with the invoice or emailed to Grant Administrator.
- Paper copy Invoices must be received (via mail) for processing.
- The State of New Hampshire requires a minimum of 30 days to process approved invoices.
- Mail Invoice and documentation to:

Dea Brickner-Wood SCC Grant Administrator 1 Colony Cove Road Durham, NH 03824

Section A: Grantee and Invoice Information

• Provide the information for the grant and submit with original signature, date.

Section B (blue): Budget Table

- Budget table is in excel format, with total formulas.
- In Section B (green) provide information <u>only</u> for the task that is being invoiced.
- Provide the Task # (number). The Invoice Task # should correspond to the Task # in the Grant Agreement Exhibit A and B. An Invoice may include more than one project task. Add task lines to Section B as needed.
- Provide expense costs by project activity for Grant fund reimbursement.
- Provide expense costs by project activity for Other Project funds (cash and non-cash) used to accomplish the Task.
- Attach documentation for expense costs the Grant funds are reimbursing.

 Unless otherwise noted in the Grant Agreement, do not attached documentation for Other Project funds.

Section C (green): Project Budget Cumulative Invoices

• Include the total for this invoice plus any previously submitted invoices.

The Total Project Budget in this section of the invoice form should correspond to the total project budget in the Grant Agreement Exhibit B. Provide remaining project Grant funds and Other Project funds.

Section D: Narrative

Provide a brief narrative detailing project task accomplishments and explaining task expenses.

- Summarize the project tasks undertaken and the outcomes achieved. Refer to the Project Tasks provided in the Grant Application and Grant Agreement Exhibit A.
- Describe, if applicable, task modifications that have occurred during project implementation.
- Describe, if applicable, budget expenses and modifications.

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Section A: Grantee and Invoice Information

Grantee Name (checks payable to):		
Project Name:		
Grant Award Year:		
Grantee Mailing Address:		
Attention To:		
Invoice #		
Invoice Request: \$		
Certified by Grantee (signature):		Date:
Name (printed):	Title:	

Section B: Task Budget

Section B. Invoice #					
Task #	Activity / Expense	SCC Grant Funds \$	Other Project Funds: Cash \$	Other Project Funds: Non- Cash \$	Total Grant & Other Project Funds \$
Task #:					
	Supplies, Materials				
	Equipment				
	Purchase				
	Contract Services				
	Staff Wages / Salary				
	Administration				
	Other				
Totals: SCC Grant Inv Project funds	oice & Other				

Section C: Project Budget Cumulative Invoices

Section C. Project Budget Cumulative Invoices						
Invoice #	Date Submitted	SCC Grant Funds \$	Other Project Funds: Cash \$	Other Project Funds: Non- Cash \$	Total Grant & Other Project Funds \$	
Total Invoices submitted &/or approved						
Total Project Budget						
Remaining Project Funds						

Section D: Narrative

Description of the project tasks completed.