

PAYMENT PROVISIONS

The Department will pay the Grantee for the services rendered pursuant to this Grant Agreement as follows:

- A. Subject to the availability of State and Federal funds and the other terms and conditions of this grant, the Department will reimburse the Grantee in accordance with Rider 3 for providing the services described in Rider 2, up to the maximum amount of \$_____ and no payments shall be made under this grant in excess of that amount.

- B. The Department will make payments to the Grantee through ACH. Within 10 days of the grant award, the Grantee must submit or must have already submitted its ACH and electronic addenda information (obtained at www.vendorregistration.state.pa.us/cvmu/paper/Forms/ACH-EFTenrollmentform.pdf <www.vendorregistration.state.pa.us/cvmu/paper/Forms/ACH-EFTenrollmentform.pdf><http://www.vendorregistration.state.pa.us/cvmu/paper/Forms/ACH-EFTenrollmentform.pdf>) to the Commonwealth's Payable Service Center, Vendor Data Management Unit at 717-214-0140 (FAX) or by mail to the Office of Comptroller Operations, Bureau of Payable Services, Payable Service Center, Vendor Data Management Unit, 555 Walnut Street - 9th Floor, Harrisburg, PA 17101.

The Grantee must submit a unique invoice number with each invoice submitted. The unique invoice number will be listed on the Commonwealth of Pennsylvania's ACH remittance advice to enable the Grantee to properly apply the state agency's payment to the respective invoice or program.

It is the responsibility of the Grantee to ensure that the ACH information contained in the Commonwealth's central vendor master file is accurate and complete. Failure to maintain accurate and complete information may result in delays in payments.

- C. The Department will make payment to the Grantee in the amount stated in Paragraph A in accordance with the budget set forth in Rider 3 as follows:
 - 1. Grantee will submit itemized invoices and the Grantee's quarterly report for services provided pursuant to this Agreement. On a quarterly basis, Applicant shall invoice the Department for costs incurred during the prior quarter. The Grantee must indicate on each invoice submitted the grant number, its Federal I.D. number, its SAP vendor number, the period covered by the invoice, the name of the person preparing the invoice, and the date submitted.

 - 2. An original and three copies of all invoices will be sent by the Grantee to: Department of Human Services, Room 224, Willow Oak Building, 1006 Hemlock Drive, P.O. Box 2675, Harrisburg, PA 17105. Grantee must retain all documentation for expenses to

support all invoices. For those workers who are not full-time, Applicant must maintain weekly time records.

3. The Department may adjust payment amounts based on Grantee's actual allowable expenditures incurred. The Department will not make payments in excess of the amount listed in Paragraph A and may adjust, deny or reduce payments for expenditures when this amount is or will be exceeded.
 4. The Department may disapprove any expenditures incurred by the Grantee that are not in accordance with the terms of this Grant Agreement and adjust payment to the Grantee accordingly. Any duplication of payment requests for services rendered under this grant may result in termination of this Grant Agreement by the Department.
 5. The Grantee's quarterly invoice and report must be submitted on or before the last business day of the subsequent month. Grantee must submit its final invoice and expenditure report for each State Fiscal Year so that they are received no later than 45 days after the expiration of the State Fiscal Year.
- D. Payment for services will be made in accordance with Rider 3. Living and travel expenses may be reimbursed, but shall not exceed the rates as set forth in Commonwealth Management Directive 230.10, unless the Grantee has higher rates which have been established by its officers/officials and published prior to entering into this grant. Itemized receipts must be retained in the Grantee's files to support all claims submitted for living and travel expenses reimbursements. These receipts must be available to the Department, on request, to support Federal or State audits.
- E. This Grant must comply with applicable federal audit requirements, including the Uniform Administrative Requirements, Cost Principles and Audit Requirements for HHS Awards and is subject to audit in accordance with Audit Clause A, attached as part of Rider 5. Regardless of the level of audit conducted in accordance with Audit Clause A, the audit report shall include a Supplementary Schedule which consists of a Budget to Actual presentation in the same format and level of detail as Rider 3, Budget, including all updates and revisions. This Schedule will be used for reconciliation and settlement purposes and should reflect all allowable and reimbursable costs associated with this Grant. The Supplementary Schedule, a Corrective Action Plan, and the Management Letter, if one was issued, shall be included in the audit report.
- F. The Grantee will follow the applicable Cost Principles in the grant and as set forth in 45 C.F.R. Part 75 Subpart E.
- G. The Grantee has the option to reallocate funds among or within budget categories and line items, subject to the following:
1. Grantee must obtain the Department's prior written approval to: (1) add any additional line items not specified in the Budget; (2) reallocate funds within the Personnel/Fringe Benefits Category; (3) reallocate funds within budget categories so as to increase any

line item by more than 10 percent; and (4) reallocate funds between budget categories.

2. All Budget Revision Requests must be received in the Department by the grant termination date.

H. Grantee shall submit a final progress, final invoice, and expenditure report no later than sixty (60) days after the ending date of this Grant Agreement or project completion, or in the event of earlier termination or cancellation, no later than sixty (60) days after notice to the Grantee of such termination or cancellation. The Department will not reimburse or pay any invoice not submitted in accordance with this provision. This report should be mailed to:

Division Director, Division of Federal Programs and Program Management
Department of Human Service, Bureau of Policy
Room 224, Willow Oak Bldg, P.O. Box 2675
Harrisburg, Pennsylvania 17105-2675.

I. Grantee shall account for all interest earned on the payments made under this grant and use it for expenditures in accordance with the terms of this Grant Agreement.

1. A detailed accounting of the expenditures made by the Grantee under this Grant Agreement shall be sent directly to the Bureau of Financial Operations, P.O. Box 2675, Harrisburg, Pennsylvania 17105, within thirty (30) days after expiration of this Grant Agreement.

J. Any unspent or excess funds resulting from payments by the Department must be returned to the Department. Funds shall be returned by check payable to Commonwealth of Pennsylvania and must reference the Grant Number. Grantee shall send the check, along with the final report to:

Division Director, Division of Federal Programs and Program Management
Department of Human Service, Bureau of Policy
Room 224, Willow Oak Bldg, P.O. Box 2675
Harrisburg, Pennsylvania 17105-2675.

K. This grant is subject to audit by the Commonwealth in accordance with Audit Clause A.