

Federal Fiscal Year (FFY) 15/16 Invoice Process



CDPH/WIC DIVISION

Telephone # 1-877-411-9748
Attendee Access Code # 7492591



Agenda

- Review Old Invoice – FFY 14/15
- Review New Invoice – FFY 15/16
- How to Avoid a Dispute
- What, Where & When to Submit
- Designees
- Invoice Approval Timeline
- Generating Subsequent Invoices
- Payment Process
- Contacts



FFY 2014 – 2015 Invoice

STATE OF CALIFORNIA

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
WIC SUPPLEMENTAL NUTRITION PROGRAM
3901 Lennane Drive, Sacramento, CA 95834

5 line items

Budget Entered Number here Sum of 'Other WIC Services' Amounts Requested

Contractor's Name: **Sample Local Agency**
Contractor's Address: 3901 Lennane Drive
Sacramento, CA 95834
Date Invoice Generated by State:
September 15, 2015

Contract Number:
Vendor Number:
Billing Period:

Local Agency Use Only:
#12
14-12345
0000001234-00

Budget Line Items	Maximum Payable Amount	Year to Date Previously Invoiced	Amount Requested Non-Restricted	Amounts Requested Restricted *	Total Amount Requested	Year to Date Invoiced	Remaining Maximum Payable Amount
1. PERSONNEL	\$ 1,849,200						
a) Salaries & Wages	\$ 1,484,200	\$ 1,114,607.75	\$ -	\$ -	\$ -	\$ 1,114,607.75	\$ 369,592.25
b) Fringe Benefits	\$ 365,000	\$ 253,869.93	\$ -	\$ -	\$ -	\$ 253,869.93	\$ 111,130.07
2. OPERATING EXPENSES	\$ 520,048	\$ 356,081.48	\$ -	\$ -	\$ -	\$ 356,081.48	\$ 163,966.52
3. CAPITAL EXPENDITURES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. OTHER COSTS (Subcontractors)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. INDIRECT COSTS (Maximum 13.7897% of Total Personnel Costs, including Salaries, Wages, and Fringe Benefits.)	\$ 255,000	\$ 188,264.03	\$ -	\$ -	\$ -	\$ 188,264.03	\$ 66,735.97
TOTALS	\$ 2,624,248	\$ 1,912,823.19	\$ -	\$ -	\$ -	\$ 1,912,823.19	\$ 711,424.81

Less: Withhold - Recovery _____
Release of Withhold _____
Amount to be Paid \$ -

Reason for Withhold/Recovery:

I certify this claim contains actual expenditures for allowable WIC Program costs performed in accordance with the provisions. Sign in BLUE INK only.

3 Signatures

Preparer's Signature _____	Preparer's Telephone _____	Primary WIC Program Contact RD's Signature _____	Date _____	Agency Director's Signature (or designee) _____	Date _____
Print Preparer's Name _____	Preparer's Email _____	Print Primary WIC Program Contact RD's Name _____		Print Agency Director's Name _____	

FOR STATE USE ONLY APPROVED FOR PAYMENT					
14-53303-5510-741-01-10557L-14	<u>Local Assistance</u>	14-53300-5510-741-01-10572L-14	<u>Farmers' Market</u>	14-53313-5510-741-01-10556L-13	<u>Peer Counseling</u>
Billing Code		Billing Code		Billing Code	
Date	Amount	Date	Amount	Date	Amount
<u>XX-XXXX-XXXX-XX-XXXXXX-XX</u>		<u>XX-XXXX-XXXX-XX-XXXXXX-XX</u>		14-53313-5510-741-01-10556L-14	<u>Peer Counseling</u>
Billing Code		Billing Code		Billing Code	
Date	Amount	Date	Amount	Date	Amount
AUTHORIZED SIGNATURE		AUTHORIZED SIGNATURE		AUTHORIZED SIGNATURE	



...Continued

Linked to 'Amounts Requested Restricted' on 1st page of Invoice

OTHER WIC SERVICES: Anemia Screening (53303)					
Budget Line Items	Maximum Payable Amount	Year to Date Previously Invoiced	Amounts Requested	Year to Date Invoiced	Remaining Maximum Payable Amount
1. PERSONNEL					
a) Salaries & Wages		\$ -	\$ -	\$ -	
b) Fringe Benefits		\$ -	\$ -	\$ -	
2. OPERATING EXPENSES		\$ -	\$ -	\$ -	
3. CAPITAL EXPENDITURES		\$ -	\$ -	\$ -	
4. OTHER COSTS (Subcontractors)		\$ -	\$ -	\$ -	
5. INDIRECT COSTS <small>(Maximum 13.7897% of Total Personnel Costs, including Salaries, Wages, and Fringe Benefits.)</small>		\$ -	\$ -	\$ -	
TOTALS	\$ 10,150.00	\$ -	\$ -	\$ -	\$ 10,150.00

OTHER WIC SERVICES: Breastfeeding Peer Counseling Program (53313)					
Budget Line Items	Maximum Payable Amount	Year to Date Previously Invoiced	Amounts Requested	Year to Date Invoiced	Remaining Maximum Payable Amount
1. PERSONNEL	\$ 136,203.87				\$ 72,691.07
a) Salaries & Wages	\$ 109,200.00	\$ 82,852.35	\$ -	\$ 82,852.35	\$ 89,860.45
b) Fringe Benefits	\$ 27,003.87	\$ 19,339.55	\$ -	\$ 19,339.55	\$ 27,003.87
2. OPERATING EXPENSES	\$ 2,000.00	\$ -	\$ -	\$ -	\$ 2,000.00
3. CAPITAL EXPENDITURES	\$ -	\$ -	\$ -	\$ -	\$ -
4. OTHER COSTS (Subcontractors)	\$ -	\$ -	\$ -	\$ -	\$ -
5. INDIRECT COSTS <small>(Maximum 13.7897% of Total Personnel Costs, including Salaries, Wages, and Fringe Benefits.)</small>	\$ 16,796.13	\$ 14,091.91	\$ -	\$ 14,091.91	\$ 2,704.22
TOTALS	\$ 155,000.00	\$ 116,283.81	\$ -	\$ 116,283.81	\$ 38,716.19

Line Items, as illustrated in the FFY 14/15 Contract

Line Items, as illustrated on FFY 14/15 Invoice

Budget

- 1. **Personnel***
 - Salaries & Wages -
 - Fringe Benefits -
- 2. **Operating Expenses**
- 3. **Capital Expenditures**
- 4. **Other Costs**
(Subcontracts Only)
- 5. **Indirect Costs**
(% of Total Direct Costs)



Yielded

Budget Line Items
1. PERSONNEL <ul style="list-style-type: none">a) <i>Salaries & Wages</i>b) <i>Fringe Benefits</i>
2. OPERATING EXPENSES
3. CAPITAL EXPENDITURES
4. OTHER COSTS
5. INDIRECT COSTS (Maximum 13.7897% of Total Personnel Costs, including Salaries, Wages, and Fringe Benefits.)



NEW INVOICE FOR FEDERAL FISCAL YEAR 2015 – 2016

(October 1st, 2015 to September 30th, 2016)



Personnel
Total Salaries and Wages
Fringe Benefits
Personnel
Operating Expenses
Minor Equipment
General Office Expenses
Training
Travel
Professional Certifications
Outreach
Media/Promotion
Program Materials
Vehicle Maintenance
Audit
Facility Costs (See Exhibit B Attachment III for breakdown)
Operating Expenses
Major Equipment
Telephone System
Information Technology Equipment
Vehicle (s)
Photocopy Equipment
Major Equipment
Subcontracts
Subcontracts
Indirect Costs
Indirect Costs
TOTAL COSTS

Line Items, as illustrated on FFY 15/16 Invoice

Budget Line Items
PERSONNEL
Total Salaries & Wages
Fringe Benefits
OPERATING EXPENSES
Minor Equipment
General Office Expenses
Training
Travel
Professional Certifications
Outreach
Media/Promotion
Program Materials
Vehicle Maintenance
Audit
Facility Costs
MAJOR EQUIPMENT
Telephone System
Information Technology Equipment
Vehicle(s)
Photocopy Equipment
SUBCONTRACTS
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)



Yielded

Line Items, as illustrated in the FFY 15/16 Contract

Page 1

WIC PROGRAM INVOICE Budget Period 10/01/15 - 09/30/16

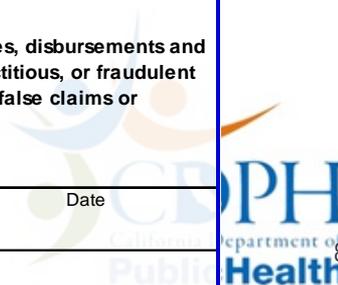
Contractor's Name: **Sample Local Agency**
 Contractor's Address: 1234 Lennane Drive
 Sacramento, CA 95834

Invoice Date: _____
 Invoice Number: **#01**
 Contract Number: **15-12345**
 Vendor Number: **0000001234-01**
 Billing Period: _____

Budget Line Items	Budgeted Amount	Year to Date Previously Invoiced	Total Amount Requested	Year to Date Invoiced	Remaining Budgeted Amount
PERSONNEL	\$ 13,401,623				\$ 13,401,623.00
Total Salaries & Wages	\$ 12,657,518	\$ -	\$ -	\$ -	\$ 12,657,518.00
Fringe Benefits	\$ 744,105	\$ -	\$ -	\$ -	\$ 744,105.00
OPERATING EXPENSES	\$ 974,484	\$ -	\$ -	\$ -	\$ 974,484.00
Minor Equipment	\$ 12,000	\$ -	\$ -	\$ -	\$ 12,000.00
General Office Expenses	\$ 268,535	\$ -	\$ -	\$ -	\$ 268,535.00
Training	\$ 21,923	\$ -	\$ -	\$ -	\$ 21,923.00
Travel	\$ 34,039	\$ -	\$ -	\$ -	\$ 34,039.00
Professional Certifications	\$ -	\$ -	\$ -	\$ -	\$ -
Outreach	\$ 4,100	\$ -	\$ -	\$ -	\$ 4,100.00
Media/Promotion	\$ 400	\$ -	\$ -	\$ -	\$ 400.00
Program Materials	\$ 22,419	\$ -	\$ -	\$ -	\$ 22,419.00
Vehicle Maintenance	\$ 10,000	\$ -	\$ -	\$ -	\$ 10,000.00
Audit	\$ 2,200	\$ -	\$ -	\$ -	\$ 2,200.00
Facility Costs	\$ 598,868	\$ -	\$ -	\$ -	\$ 598,868.00
MAJOR EQUIPMENT	\$ 51,350	\$ -	\$ -	\$ -	\$ 51,350.00
Telephone System	\$ -	\$ -	\$ -	\$ -	\$ -
Information Technology Equipment	\$ -	\$ -	\$ -	\$ -	\$ -
Vehicle(s)	\$ 31,350	\$ -	\$ -	\$ -	\$ 31,350.00
Photocopy Equipment	\$ 20,000	\$ -	\$ -	\$ -	\$ 20,000.00
SUBCONTRACTS	\$ -	\$ -	\$ -	\$ -	\$ -
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)	\$ 469,423	\$ -	\$ -	\$ -	\$ 469,423.00
TOTALS	\$ 14,896,880	\$ -	\$ -	\$ -	\$ 14,896,880.00
		Amount to be Paid	\$ -		

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812). Sign in BLUE INK only.

Preparer's Signature	Preparer's Telephone	Agency Director's Signature	Date
Print Preparer's Name	Preparer's Email	Print Agency Director's Name	



FOR STATE USE ONLY - APPROVED FOR PAYMENT

<u>15-53303-5510-741-01-10557L-15</u> Local Assistance	<u>15-53300-5510-741-01-10572L-15</u> FMNP	<u>15-53313-5510-741-01-10556L-14</u> BFPC
Billing Code	Billing Code	Billing Code
\$ -	\$ -	\$ -
Date	Date	Date
Amount	Amount	Amount
		<u>15-53313-5510-741-01-10556L-15</u> BFPC
		Billing Code
Contract Manager Signature	Date	LOS Chief Signature
		Date
		Amount



FOR STATE USE ONLY



...Page 3 and beyond

WIC SERVICES:		NSA (includes LVL - Unrestricted)			
Budget Line Items	Budgeted Amount	Year to Date Previously Invoiced	Amounts Requested	Year to Date Invoiced	Remaining Budgeted Amount
PERSONNEL					
Total Salaries & Wages		\$ -	\$ -	\$ -	\$ -
Fringe Benefits		\$ -	\$ -	\$ -	\$ -
OPERATING EXPENSES					
Minor Equipment		\$ -	\$ -	\$ -	\$ -
General Office Expenses		\$ -	\$ -	\$ -	\$ -
Training		\$ -	\$ -	\$ -	\$ -
Travel		\$ -	\$ -	\$ -	\$ -
Professional Certifications		\$ -	\$ -	\$ -	\$ -
Outreach		\$ -	\$ -	\$ -	\$ -
Media/Promotion		\$ -	\$ -	\$ -	\$ -
Program Materials		\$ -	\$ -	\$ -	\$ -
Vehicle Maintenance		\$ -	\$ -	\$ -	\$ -
Audit		\$ -	\$ -	\$ -	\$ -
Facility Costs		\$ -	\$ -	\$ -	\$ -
MAJOR EQUIPMENT					
Telephone System		\$ -	\$ -	\$ -	\$ -
Information Technology Equipment		\$ -	\$ -	\$ -	\$ -
Vehicle(s)		\$ -	\$ -	\$ -	\$ -
Photocopy Equipment		\$ -	\$ -	\$ -	\$ -
SUBCONTRACTS					
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)		\$ -	\$ -	\$ -	\$ -
TOTALS		\$ 4,454,631.00	\$ -	\$ -	\$ -

Review

- The FFY 2015 – 2016 invoice was built to match the Budget Detail worksheet from the 4-year (FFY 2015 – 2019) subvention contract
- Amount Requested columns for Non-Restricted and Restricted were eliminated from the invoice
- Core NSA costs - unrestricted now have a separate page on the invoice and include Local Vendor Liaison (LVL) costs
- More line items tracked: 11 for Operating Expenses and 4 for Major Equipment
- Only two people need to sign invoices: the Preparer and Agency Director



HOW TO...COMPLETE THE INVOICE

Page 1

WIC PROGRAM INVOICE Budget Period 10/01/15 - 09/30/16

Contractor's Name:
Contractor's Address:

Sample Local Agency
1234 Lennane Drive
Sacramento, CA 95834

Required to fill in

Invoice Date:

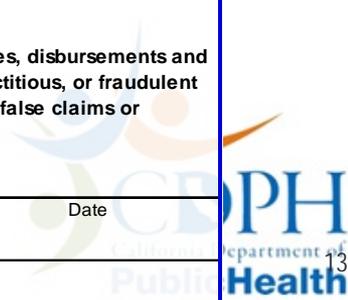
Invoice Number: #01
Contract Number: 15-12345
Vendor Number: 0000001234-01
Billing Period:

Prefilled In. Verify Info. is correct

Budget Line Items	Budgeted Amount	Year to Date Previously Invoiced	Total Amount Requested	Year to Date Invoiced	Remaining Budgeted Amount
PERSONNEL	\$ 13,401,623				\$ 13,401,623.00
Total Salaries & Wages	\$ 12,657,518	\$ -	\$ -	\$ -	\$ 12,657,518.00
Fringe Benefits	\$ 744,105	\$ -	\$ -	\$ -	\$ 744,105.00
OPERATING EXPENSES	\$ 974,484	\$ -	\$ -	\$ -	\$ 974,484.00
Minor Equipment	\$ 12,000	\$ -	\$ -	\$ -	\$ 12,000.00
General Office Expenses	\$ 268,535	\$ -	\$ -	\$ -	\$ 268,535.00
Training	\$ 21,923	\$ -	\$ -	\$ -	\$ 21,923.00
Travel	\$ 34,039	\$ -	\$ -	\$ -	\$ 34,039.00
Professional Certifications	\$ -	\$ -	\$ -	\$ -	\$ -
Outreach	\$ 4,100	\$ -	\$ -	\$ -	\$ 4,100.00
Media/Promotion	\$ 400	\$ -	\$ -	\$ -	\$ 400.00
Program Materials	\$ 22,419	\$ -	\$ -	\$ -	\$ 22,419.00
Vehicle Maintenance	\$ 10,000	\$ -	\$ -	\$ -	\$ 10,000.00
Audit	\$ 2,200	\$ -	\$ -	\$ -	\$ 2,200.00
Facility Costs	\$ 598,868	\$ -	\$ -	\$ -	\$ 598,868.00
MAJOR EQUIPMENT	\$ 51,350	\$ -	\$ -	\$ -	\$ 51,350.00
Telephone System	\$ -	\$ -	\$ -	\$ -	\$ -
Information Technology Equipment	\$ -	\$ -	\$ -	\$ -	\$ -
Vehicle(s)	\$ 31,350	\$ -	\$ -	\$ -	\$ 31,350.00
Photocopy Equipment	\$ 20,000	\$ -	\$ -	\$ -	\$ 20,000.00
SUBCONTRACTS	\$ -	\$ -	\$ -	\$ -	\$ -
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)	\$ 469,423	\$ -	\$ -	\$ -	\$ 469,423.00
TOTALS	\$ 14,896,880	\$ -	\$ -	\$ -	\$ 14,896,880.00
		Amount to be Paid	\$ -		

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812). Sign in BLUE INK only.

Preparer's Signature	Preparer's Telephone	Agency Director's Signature	Date
Print Preparer's Name	Preparer's Email	Print Agency Director's Name	



Completing the Invoice

WIC SERVICES:		NSA (includes LVL - Unrestricted)			
Budget Line Items	Budgeted Amount	Year to Date Previously Invoiced	Amounts Requested	Year to Date Invoiced	Remaining Budgeted Amount
PERSONNEL					
Total Salaries & Wages		\$ -	\$ -	\$ -	\$ -
Fringe Benefits		\$ -	\$ -	\$ -	\$ -
OPERATING EXPENSES					
Minor Equipment		\$ -	\$ -	\$ -	\$ -
General Office Expenses		\$ -	\$ -	\$ -	\$ -
Training		\$ -	\$ -	\$ -	\$ -
Travel		\$ -	\$ -	\$ -	\$ -
Professional Certifications		\$ -	\$ -	\$ -	\$ -
Outreach		\$ -	\$ -	\$ -	\$ -
Media/Promotion		\$ -	\$ -	\$ -	\$ -
Program Materials		\$ -	\$ -	\$ -	\$ -
Vehicle Maintenance		\$ -	\$ -	\$ -	\$ -
Audit		\$ -	\$ -	\$ -	\$ -
Facility Costs		\$ -	\$ -	\$ -	\$ -
MAJOR EQUIPMENT					
Telephone System		\$ -	\$ -	\$ -	\$ -
Information Technology Equipment		\$ -	\$ -	\$ -	\$ -
Vehicle(s)		\$ -	\$ -	\$ -	\$ -
Photocopy Equipment		\$ -	\$ -	\$ -	\$ -
SUBCONTRACTS					
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)					
		\$ -	\$ -	\$ -	\$ -
TOTALS		\$ 4,454,631.00	\$ -	\$ -	\$ -

Completing the Invoice

WIC SERVICES:		NSA (includes LVL - Unrestricted)			
Budget Line Items	Budgeted Amount	Year to Date Previously Invoiced	Amounts Requested	Year to Date Invoiced	Remaining Budgeted Amount
PERSONNEL					
Total Salaries & Wages		\$ -	\$ 97,615.86	\$ 97,615.86	
Fringe Benefits		\$ -	\$ 16,812.89	\$ 16,812.89	
OPERATING EXPENSES					
Minor Equipment		\$ -	\$ -	\$ -	
General Office Expenses		\$ -	\$ -	\$ -	
Training		\$ -	\$ -	\$ -	
Travel		\$ -	\$ -	\$ -	
Professional Certifications		\$ -	\$ -	\$ -	
Outreach		\$ -	\$ -	\$ -	
Media/Promotion		\$ -	\$ -	\$ -	
Program Materials		\$ -	\$ -	\$ -	
Vehicle Maintenance		\$ -	\$ -	\$ -	
Audit		\$ -	\$ -	\$ -	
Facility Costs		\$ -	\$ -	\$ -	
MAJOR EQUIPMENT					
Telephone System		\$ -	\$ -	\$ -	
Information Technology Equipment		\$ -	\$ -	\$ -	
Vehicle(s)		\$ -	\$ 514.00	\$ 514.00	
Photocopy Equipment		\$ -	\$ 1,000.00	\$ 1,000.00	
SUBCONTRACTS					
		\$ -	\$ -	\$ -	
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)					
		\$ -	\$ 15,791.16	\$ 15,791.16	
TOTALS	\$ 4,454,631.00	\$ -	\$ 131,733.91	\$ 131,733.91	\$ 4,322,897.09

OTHER WIC SERVICES:

Breastfeeding Peer Counseling Program [BFPC] (53313) - Optional

Budget Line Items	Budgeted Amount	Year to Date Previously Invoiced	Amounts Requested	Year to Date Invoiced	Remaining Budgeted Amount
PERSONNEL	\$ 142,201.00				
Salaries & Wages	\$ 97,326.00	\$ -	\$ -	\$ -	\$ -
Fringe Benefits	\$ 44,875.00	\$ -	\$ -	\$ -	\$ -
OPERATING EXPENSES	\$ 2,651.00				
Minor Equipment	\$ 2,000.00	\$ -	\$ -	\$ -	\$ -
General Office Expenses	\$ 651.00	\$ -	\$ -	\$ -	\$ -
Training	\$ -	\$ -	\$ -	\$ -	\$ -
Travel	\$ -	\$ -	\$ -	\$ -	\$ -
Professional Certifications	\$ -	\$ -	\$ -	\$ -	\$ -
Outreach	\$ -	\$ -	\$ -	\$ -	\$ -
Media/Promotion	\$ -	\$ -	\$ -	\$ -	\$ -
Program Materials	\$ -	\$ -	\$ -	\$ -	\$ -
Vehicle Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -
Audit	\$ -	\$ -	\$ -	\$ -	\$ -
Facility Costs	\$ -	\$ -	\$ -	\$ -	\$ -
MAJOR EQUIPMENT	\$ -				
Telephone System	\$ -	\$ -	\$ -	\$ -	\$ -
Information Technology Equipment	\$ -	\$ -	\$ -	\$ -	\$ -
Vehicle(s)	\$ -	\$ -	\$ -	\$ -	\$ -
Photocopy Equipment	\$ -	\$ -	\$ -	\$ -	\$ -
SUBCONTRACTS	\$ -				
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)	\$ 18,201.00	\$ -	\$ -	\$ -	\$ -
TOTALS	\$ 163,053.00	\$ -	\$ -	\$ -	\$ -

OTHER WIC SERVICES:

Breastfeeding Peer Counseling Program [BFPC] (53313) - Optional

Budget Line Items	Budgeted Amount	Year to Date Previously Invoiced	Amounts Requested	Year to Date Invoiced	Remaining Budgeted Amount
PERSONNEL	\$ 142,201.00				
Salaries & Wages	\$ 97,326.00	\$ -	\$ 1,000.00	\$ 1,000.00	\$ 96,326.00
Fringe Benefits	\$ 44,875.00	\$ -	\$ 2,513.00	\$ 2,513.00	\$ 42,362.00
OPERATING EXPENSES	\$ 2,651.00				
Minor Equipment	\$ 2,000.00	\$ -	\$ -	\$ -	\$ 2,000.00
General Office Expenses	\$ 651.00	\$ -	\$ 200.00	\$ 200.00	\$ 451.00
Training	\$ -	\$ -	\$ -	\$ -	\$ -
Travel	\$ -	\$ -	\$ -	\$ -	\$ -
Professional Certifications	\$ -	\$ -	\$ -	\$ -	\$ -
Outreach	\$ -	\$ -	\$ -	\$ -	\$ -
Media/Promotion	\$ -	\$ -	\$ -	\$ -	\$ -
Program Materials	\$ -	\$ -	\$ -	\$ -	\$ -
Vehicle Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -
Audit	\$ -	\$ -	\$ -	\$ -	\$ -
Facility Costs	\$ -	\$ -	\$ -	\$ -	\$ -
MAJOR EQUIPMENT	\$ -				
Telephone System	\$ -	\$ -	\$ -	\$ -	\$ -
Information Technology Equipment	\$ -	\$ -	\$ -	\$ -	\$ -
Vehicle(s)	\$ -	\$ -	\$ -	\$ -	\$ -
Photocopy Equipment	\$ -	\$ -	\$ -	\$ -	\$ -
SUBCONTRACTS	\$ -				
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)	\$ 18,201.00	\$ -	\$ -	\$ -	\$ 18,201.00
TOTALS	\$ 163,053.00	\$ -	\$ 3,713.00	\$ 3,713.00	\$ 159,340.00

WIC PROGRAM INVOICE

Budget Period 10/01/15 - 09/30/16

Contractor's Name: Sample Local Agency
Contractor's Address: 1234 Lennane Drive
 Sacramento, CA 95834

Invoice Date: October 15, 2015
Invoice Number: #01
Contract Number: 15-12345
Vendor Number: 0000001234-01
Billing Period: 10/1 - 10/15/15

Budget Line Items	Budgeted Amount	Year to Date Previously Invoiced	Total Amount Requested	Year to Date Invoiced	Remaining Budgeted Amount
PERSONNEL	\$ 13,401,623				\$ 13,283,681.25
Total Salaries & Wages	\$ 12,657,518	\$ -	\$ 98,615.86	98,615.86	\$ 12,558,902.14
Fringe Benefits	\$ 744,105	\$ -	\$ 19,325.89	19,325.89	\$ 724,779.11
OPERATING EXPENSES	\$ 974,484	\$ -	\$ 200.00	200.00	\$ 974,284.00
Minor Equipment	\$ 12,000	\$ -	\$ -	-	\$ 12,000.00
General Office Expenses	\$ 268,535	\$ -	\$ 200.00	200.00	\$ 268,335.00
Training	\$ 21,923	\$ -	\$ -	-	\$ 21,923.00
Travel	\$ 34,039	\$ -	\$ -	-	\$ 34,039.00
Professional Certifications	\$ -	\$ -	\$ -	-	\$ -
Outreach	\$ 4,100	\$ -	\$ -	-	\$ 4,100.00
Media/Promotion	\$ 400	\$ -	\$ -	-	\$ 400.00
Program Materials	\$ 22,419	\$ -	\$ -	-	\$ 22,419.00
Vehicle Maintenance	\$ 10,000	\$ -	\$ -	-	\$ 10,000.00
Audit	\$ 2,200	\$ -	\$ -	-	\$ 2,200.00
Facility Costs	\$ 598,868	\$ -	\$ -	-	\$ 598,868.00
MAJOR EQUIPMENT	\$ 51,350	\$ -	\$ 1,514.00	1,514.00	\$ 49,836.00
Telephone System	\$ -	\$ -	\$ -	-	\$ -
Information Technology Equipment	\$ -	\$ -	\$ -	-	\$ -
Vehicle(s)	\$ 31,350	\$ -	\$ 514.00	514.00	\$ 30,836.00
Photocopy Equipment	\$ 20,000	\$ -	\$ 1,000.00	1,000.00	\$ 19,000.00
SUBCONTRACTS	\$ -	\$ -	\$ -	-	\$ -
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)	\$ 469,423	\$ -	\$ 15,791.16	15,791.16	\$ 453,631.84
TOTALS	\$ 14,896,880	\$ -	\$ 135,446.91	135,446.91	\$ 14,761,433.09
			Amount to be Paid \$ 135,446.91		

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812). Sign in BLUE INK only.

Preparer's Signature	Preparer's Telephone	Agency Director's Signature	Date
Print Preparer's Name	Preparer's Email	Print Agency Director's Name	

WIC PROGRAM INVOICE

Budget Period 10/01/15 - 09/30/16

Contractor's Name: Sample Local Agency
Contractor's Address: 1234 Lennane Drive
 Sacramento, CA 95834

Invoice Date: October 15, 2015
Invoice Number: #01
Contract Number: 15-12345
Vendor Number: 0000001234-01
Billing Period: 10/1 - 10/15/15

Budget Line Items	Budgeted Amount	Year to Date Previously Invoiced	Total Amount Requested	Year to Date Invoiced	Remaining Budgeted Amount
PERSONNEL	\$ 13,401,623				\$ 13,283,681.25
Total Salaries & Wages	\$ 12,657,518	\$ -	\$ 98,615.86	\$ 98,615.86	\$ 12,558,902.14
Fringe Benefits	\$ 744,105	\$ -	\$ 19,325.89	\$ 19,325.89	\$ 724,779.11
OPERATING EXPENSES	\$ 974,484	\$ -	\$ 200.00	\$ 200.00	\$ 974,284.00
Minor Equipment	\$ 12,000	\$ -	\$ -	\$ -	\$ 12,000.00
General Office Expenses	\$ 268,535	\$ -	\$ 200.00	\$ 200.00	\$ 268,335.00
Training	\$ 21,923	\$ -	\$ -	\$ -	\$ 21,923.00
Travel	\$ 34,039	\$ -	\$ -	\$ -	\$ 34,039.00
Professional Certifications	\$ -	\$ -	\$ -	\$ -	\$ -
Outreach	\$ 4,100	\$ -	\$ -	\$ -	\$ 4,100.00
Media/Promotion	\$ 400	\$ -	\$ -	\$ -	\$ 400.00
Program Materials	\$ 22,419	\$ -	\$ -	\$ -	\$ 22,419.00
Vehicle Maintenance	\$ 10,000	\$ -	\$ -	\$ -	\$ 10,000.00
Audit	\$ 2,200	\$ -	\$ -	\$ -	\$ 2,200.00
Facility Costs	\$ 598,868	\$ -	\$ -	\$ -	\$ 598,868.00
MAJOR EQUIPMENT	\$ 51,350	\$ -	\$ 1,514.00	\$ 1,514.00	\$ 49,836.00
Telephone System	\$ -	\$ -	\$ -	\$ -	\$ -
Information Technology Equipment	\$ -	\$ -	\$ -	\$ -	\$ -
Vehicle(s)	\$ 31,350	\$ -	\$ 514.00	\$ 514.00	\$ 30,836.00
Photocopy Equipment	\$ 20,000	\$ -	\$ 1,000.00	\$ 1,000.00	\$ 19,000.00
SUBCONTRACTS	\$ -	\$ -	\$ -	\$ -	\$ -
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)	\$ 469,423	\$ -	\$ 15,791.16	\$ 15,791.16	\$ 453,631.84
TOTALS	\$ 14,896,880	\$ -	\$ 135,446.91	\$ 135,446.91	\$ 14,761,433.09

Make sure none of these are negative



Print name, sign and date

* in blue ink *
 By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and payments are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812). Sign in BLUE INK only.

Preparer's Signature	Preparer's Telephone	Agency Director's Signature	Date
Print Preparer's Name	Preparer's Email	Print Agency Director's Name	



NSA Operating Worksheet

- The only change to the NSA Operating Worksheet and Master Summary are the categories.
- There are 11 line items that will be tracked.
- Mail the NSA Operating Worksheet and Master Summary with the invoice.

Questions?



*6 to Unmute

How to Avoid a Dispute

Confirm:

- Address on Invoice matches what WIC has on file;
- Original signatures are in **blue ink** & that individuals who signed are on file at WIC;
- Indirect amounts requested are not more than the allowable percentage;
- Amounts Requested are not more than allocated per line item;
- NSA Operating Expense Worksheet & Master Summary are mailed w/ Invoice:
 - 'Total Amount Requested' (Operating Expenses) on invoice matches 'Amount Invoiced' amount on NSA worksheet
 - 'Total Amount Requested' (BFPC Operating Expenses) on invoice matches 'Amount Invoiced' amount for BFPC on NSA worksheet

What to Submit

- The (1) invoice must be mailed with the (2) NSA Operating Worksheet, for the corresponding billing period, and (3) Master Summary.
 - Failure to do so will result in an immediate dispute of the entire invoice packet.
- Print invoices in color to help facilitate speedy payment of invoices.

What to Submit

- After mailing your invoice packet, send an email
 - To: Contract Manager
 - Cc: Supervisor and the Fiscal Lead
 - Message: Inform the contract manager that the invoice, NSA Operating Worksheet and Master Summary have been mailed
 - Attach: Excel worksheet for the invoice and NSA Operating worksheet

Where to Submit

Please mail the (1) invoice, signed in [blue ink](#), (2) NSA Operating Worksheet and (3) Master Summary to:

Attn: **CONTRACT MANAGER**

CDPH/WIC Division

Local Operations Section

3901 Lennane Drive

Sacramento, CA 95834

When to Submit

- Invoices shall be submitted within forty-five (45) calendar days following the end of each billing period.

Designees

- A completed invoice requires the signature of the Preparer and the Agency Director.
- Designee letters are required to be signed in blue ink by the Agency Director.



Sample Designee Letter

October 01, 2015

Attn: Contract Manager
State WIC Program
Local Operations Section
3901 Lennane Drive
Sacramento, CA 95834

RE: Agency Director Signature Designee

Dear Contract Manager:

Sample County Health and Human Services Agency is requesting that Adam Sample, Director of Fiscal Operations, be added as the Agency Director Designee signatory on the Invoices for Federal Fiscal Year (FFY) 2015 – 2016. If you have any questions, please contact Kat Sample at 916-928-1234 or kat.sample@cdph.ca.gov.

Sincerely,



Kat Sample
Agency Director



Invoice Approval Timeline

The timeline starts on the day the CDPH/WIC Division receives an invoice

- +5 days for the Contract Manager to review and approve or dispute an Invoice
- +1 day for the Supervisor to review, approve or dispute an Invoice
- +2 days for the Fiscal Lead to approve and move forward an Invoice
- +7 days for our accounting unit to review, approve or dispute an Invoice

= 15 calendar days to review and approve or dispute an invoice



...Continued

- Once an invoice has been approved by the CDPH/WIC Division for payment an email will be sent by the Fiscal Lead notifying the local agency that they may begin working on the next invoice

...Continued

- If an invoice is disputed, the invoice approval timeline is reset.
- If an invoice is disputed, local agencies must submit a new invoice within 5 working days.

Questions?



*6 to Unmute

Generating Subsequent Invoices

- You will receive a locked workbook filled with invoice templates for the entire FFY 2015/2016
 - The workbook includes Supplemental Invoice templates
 - i.e. Local agencies that bill monthly will receive a workbook with 12 invoice templates for FFY 2015/2016 and supplemental invoice templates
- Invoice #1 links to Invoice #2. Invoice #2 links to Invoice #3 and so forth.

WIC PROGRAM INVOICE

Budget Period 10/01/15 - 09/30/16

Contractor's Name: Sample Local Agency
Contractor's Address: 1234 Lennane Drive
 Sacramento, CA 95834

Invoice Date: October 15, 2015
Invoice Number: #01
Contract Number: 15-12345
Vendor Number: 0000001234-01
Billing Period: 10/1 - 10/15/15

Budget Line Items	Budgeted Amount	Year to Date Previously Invoiced	Total Amount Requested	Year to Date Invoiced	Remaining Budgeted Amount
PERSONNEL	\$ 13,401,623				13,283,681.25
Total Salaries & Wages	\$ 12,657,518	\$ -	\$ 98,615.86	\$ 98,615.86	12,558,902.14
Fringe Benefits	\$ 744,105	\$ -	\$ 19,325.89	\$ 19,325.89	724,779.11
OPERATING EXPENSES	\$ 974,484	\$ -	\$ 200.00	\$ 200.00	974,284.00
Minor Equipment	\$ 12,000	\$ -	\$ -	\$ -	12,000.00
General Office Expenses	\$ 268,535	\$ -	\$ 200.00	\$ 200.00	268,335.00
Training	\$ 21,923	\$ -	\$ -	\$ -	21,923.00
Travel	\$ 34,039	\$ -	\$ -	\$ -	34,039.00
Professional Certifications	\$ -	\$ -	\$ -	\$ -	-
Outreach	\$ 4,100	\$ -	\$ -	\$ -	4,100.00
Media/Promotion	\$ 400	\$ -	\$ -	\$ -	400.00
Program Materials	\$ 22,419	\$ -	\$ -	\$ -	22,419.00
Vehicle Maintenance	\$ 10,000	\$ -	\$ -	\$ -	10,000.00
Audit	\$ 2,200	\$ -	\$ -	\$ -	2,200.00
Facility Costs	\$ 598,868	\$ -	\$ -	\$ -	598,868.00
MAJOR EQUIPMENT	\$ 51,350	\$ -	\$ 1,514.00	\$ 1,514.00	49,836.00
Telephone System	\$ -	\$ -	\$ -	\$ -	-
Information Technology Equipment	\$ -	\$ -	\$ -	\$ -	-
Vehicle(s)	\$ 31,350	\$ -	\$ 514.00	\$ 514.00	30,836.00
Photocopy Equipment	\$ 20,000	\$ -	\$ 1,000.00	\$ 1,000.00	19,000.00
SUBCONTRACTS	\$ -	\$ -	\$ -	\$ -	-
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)	\$ 469,423	\$ -	\$ 15,791.16	\$ 15,791.16	453,631.84
TOTALS	\$ 14,896,880	\$ -	\$ 135,446.91	\$ 135,446.91	14,761,433.09
Amount to be Paid			\$ 135,446.91		

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812). Sign in BLUE INK only.

Preparer's Signature	Preparer's Telephone	Agency Director's Signature	Date
Print Preparer's Name	Preparer's Email	Print Agency Director's Name	

WIC PROGRAM INVOICE

Budget Period 10/01/15 - 09/30/16

Contractor's Name: Sample Local Agency
Contractor's Address: 1234 Lennane Drive
 Sacramento, CA 95834

Invoice Date:

Invoice Number: #02

Contract Number: 15-12345

Vendor Number: 0000001234-01

Billing Period:

Budget Line Items	Budgeted Amount	Year to Date Previously Invoiced	Total Amount Requested	Year to Date Invoiced	Remaining Budgeted Amount
PERSONNEL	\$ 13,401,623				\$ 13,283,681
Total Salaries & Wages	\$ 12,657,518	\$ 98,615.86	-	\$ 98,615.86	\$ 12,558,902.14
Fringe Benefits	\$ 744,105	\$ 19,325.89	-	\$ 19,325.89	\$ 724,779.11
OPERATING EXPENSES	\$ 974,484	\$ 200.00	-	\$ 200.00	\$ 974,284.00
Minor Equipment	\$ 12,000	\$ -	-	\$ -	\$ 12,000.00
General Office Expenses	\$ 268,535	\$ 200.00	-	\$ 200.00	\$ 268,335.00
Training	\$ 21,923	\$ -	-	\$ -	\$ 21,923.00
Travel	\$ 34,039	\$ -	-	\$ -	\$ 34,039.00
Professional Certifications	\$ -	\$ -	-	\$ -	\$ -
Outreach	\$ 4,100	\$ -	-	\$ -	\$ 4,100.00
Media/Promotion	\$ 400	\$ -	-	\$ -	\$ 400.00
Program Materials	\$ 22,419	\$ -	-	\$ -	\$ 22,419.00
Vehicle Maintenance	\$ 10,000	\$ -	-	\$ -	\$ 10,000.00
Audit	\$ 2,200	\$ -	-	\$ -	\$ 2,200.00
Facility Costs	\$ 598,868	\$ -	-	\$ -	\$ 598,868.00
MAJOR EQUIPMENT	\$ 51,350	\$ 1,514.00	-	\$ 1,514.00	\$ 49,836.00
Telephone System	\$ -	\$ -	-	\$ -	\$ -
Information Technology Equipment	\$ -	\$ -	-	\$ -	\$ -
Vehicle(s)	\$ 31,350	\$ 514.00	-	\$ 514.00	\$ 30,836.00
Photocopy Equipment	\$ 20,000	\$ 1,000.00	-	\$ 1,000.00	\$ 19,000.00
SUBCONTRACTS	\$ -	\$ -	-	\$ -	\$ -
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)	\$ 469,423	\$ 15,791.16	-	\$ 15,791.16	\$ 453,631.84
TOTALS	\$ 14,896,880	\$ 135,446.91	\$ -	\$ 135,446.91	\$ 14,761,433.09
		Amount to be Paid	\$ -		

Auto populated from
Invoice #1



By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812). Sign in BLUE INK only.

Preparer's Signature

Preparer's Telephone

Agency Director's Signature

Date

Print Preparer's Name

Preparer's Email

Print Agency Director's Name

Invoice Number: #01

WIC SERVICES: NSA (includes LVL - Unrestricted)

Budget Line Items	Budgeted Amount	Year to Date Previously Invoiced	Amounts Requested	Year to Date Invoiced	Remaining Budgeted Amount
PERSONNEL					
Total Salaries & Wages		\$ -	\$ 97,615.86	\$ 97,615.86	
Fringe Benefits		\$ -	\$ 16,812.89	\$ 16,812.89	
OPERATING EXPENSES					
Minor Equipment		\$ -	\$ -	\$ -	
General Office Expenses		\$ -	\$ -	\$ -	
Training		\$ -	\$ -	\$ -	
Travel		\$ -	\$ -	\$ -	
Professional Certifications		\$ -	\$ -	\$ -	
Outreach		\$ -	\$ -	\$ -	
Media/Promotion		\$ -	\$ -	\$ -	
Program Materials		\$ -	\$ -	\$ -	
Vehicle Maintenance		\$ -	\$ -	\$ -	
Audit		\$ -	\$ -	\$ -	
Facility Costs		\$ -	\$ -	\$ -	
MAJOR EQUIPMENT					
Telephone System		\$ -	\$ -	\$ -	
Information Technology Equipment		\$ -	\$ -	\$ -	
Vehicle(s)		\$ -	\$ 514.00	\$ 514.00	
Photocopy Equipment		\$ -	\$ 1,000.00	\$ 1,000.00	
SUBCONTRACTS		\$ -	\$ -	\$ -	
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)		\$ -	\$ 15,791.16	\$ 15,791.16	
TOTALS	\$ 4,454,631.00	\$ -	\$ 131,733.91	\$ 131,733.91	\$ 4,322,897.09

Auto populates to Invoice #2

Invoice Number: #02

WIC SERVICES: NSA (includes LVL - Unrestricted)					
Budget Line Items	Budgeted Amount	Year to Date Previously Invoiced	Amounts Requested	Year to Date Invoiced	Remaining Budgeted Amount
PERSONNEL					
Total Salaries & Wages		\$ 97,615.86	-	\$ 97,615.86	
Fringe Benefits		\$ 16,812.89	-	\$ 16,812.89	
OPERATING EXPENSES					
Minor Equipment		\$ -	-	\$ -	
General Office Expenses		\$ -	-	\$ -	
Training		\$ -	-	\$ -	
Travel		\$ -	-	\$ -	
Professional Certifications		\$ -	-	\$ -	
Outreach		\$ -	-	\$ -	
Media/Promotion		\$ -	-	\$ -	
Program Materials		\$ -	-	\$ -	
Vehicle Maintenance		\$ -	-	\$ -	
Audit		\$ -	-	\$ -	
Facility Costs		\$ -	-	\$ -	
MAJOR EQUIPMENT					
Telephone System		\$ -	-	\$ -	
Information Technology Equipment		\$ -	-	\$ -	
Vehicle(s)		\$ 514.00	-	\$ 514.00	
Photocopy Equipment		\$ 1,000.00	-	\$ 1,000.00	
SUBCONTRACTS					
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)		\$ 15,791.16	-	\$ 15,791.16	
TOTALS	\$ 4,454,631.00	\$ 131,733.91	\$ -	\$ 131,733.91	\$ 4,322,897.09

Auto populated from Invoice #1



Review

- The "Year to Date Invoiced" column on the invoice, is automatically populated into "Year to Date Previously Invoiced" column on all subsequent invoices.
- As a result, the next invoice is immediately ready for entering numbers in the "Amounts Requested" column*.

* Do not start entering numbers until notification has been received from the Fiscal Lead that local agencies may begin working on the next invoice.

WIC SERVICES: NSA (includes LVL - Unrestricted)					
Budget Line Items	Budgeted Amount	Year to Date Previously Invoiced	Amounts Requested	Year to Date Invoiced	Remaining Budgeted Amount
PERSONNEL					
Total Salaries & Wages		\$ 97,615.86	\$ -	\$ 97,615.86	
Fringe Benefits		\$ 16,812.89	\$ -	\$ 16,812.89	
OPERATING EXPENSES					
Minor Equipment		\$ -	\$ -	\$ -	
General Office Expenses		\$ -	\$ -	\$ -	
Training		\$ -	\$ -	\$ -	
Travel		\$ -	\$ -	\$ -	
Professional Certifications		\$ -	\$ -	\$ -	
Outreach		\$ -	\$ -	\$ -	
Media/Promotion		\$ -	\$ -	\$ -	
Program Materials		\$ -	\$ -	\$ -	
Vehicle Maintenance		\$ -	\$ -	\$ -	
Audit		\$ -	\$ -	\$ -	
Facility Costs		\$ -	\$ -	\$ -	
MAJOR EQUIPMENT					
Telephone System		\$ -	\$ -	\$ -	
Information Technology Equipment		\$ -	\$ -	\$ -	
Vehicle(s)		\$ 514.00	\$ -	\$ 514.00	
Photocopy Equipment		\$ 1,000.00	\$ -	\$ 1,000.00	
SUBCONTRACTS					
INDIRECT COSTS (Maximum 13.8% of Total Personnel Costs)		\$ 15,791.16	\$ -	\$ 15,791.16	
TOTALS	\$ 4,454,631.00	\$ 131,733.91	\$ -	\$ 131,733.91	\$ 4,322,897.09

Unlocked

Payment Process

- The CDPH/WIC Division receives an invoice
- +15 days for the CDPH/WIC Division to review and approve an invoice
- +15 days for CDPH accounting to process and send a remittance advice (RA) to the State Controller's Office (SCO) for payment
- +15 days for SCO to process RAs and pay an invoice

= 45 CALENDAR DAYS UNTIL PAYMENT

Contacts

1. Local Agency Contract Manager
2. George Otiono, Fiscal Lead
 - (916) 928-8817 or
george.otiono@cdph.ca.gov
3. Claudia Desmangles, LOU II, Chief
 - (916) 928-8640 or
claudia.desmangles@cdph.ca.gov

Summary

- Reviewed Old Invoice – FFY 14/15
- Reviewed New Invoice – FFY 15/16
- How to Avoid a Dispute
- What, Where & When to Submit
- Designees
- Invoice Approval Timeline
- Generating Subsequent Invoices
- Payment Process
- Contacts

Questions?



*6 to Unmute