



Strategic solutions for Maine's health care needs

Grants Management & Financial Reporting

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Grants Management

- Please reference your project number in all correspondence to the Foundation
- Any special conditions listed in your grant contract

Changes in your Project

- Changes in program scope or objectives must be approved by the Foundation in advance and in writing. Modification forms are available at <http://www.mehaf.org/reporting-instructions.aspx>
- MeHAF's Reallocation Policy:
 - Grantees may reallocate up to 10% of their project's total budget without permission from the Foundation, but will need to provide an explanation of those changes in their grant reporting.
 - Reallocation of more than 10% requires written permission from the Foundation.
- Requests for these type of changes should be directed to your MeHAF Program Officer.

Beginning January 2010, all reporting requirements must be submitted through the Foundation's Grantee Online Reporting page.

Only one individual from your organization may have authorization to upload reporting forms for each grant. If there is a change in staff, then you will need to contact the Foundation to transfer the account.


Financial Reporting

Financial reporting is an important component of your interim and final report because it links the funding to specific elements of your project.

MeHAF has standardized its financial reporting form for all of its grants program.



MeHAF requires grantees to use its reporting forms which are available at www.mehaf.org

 MeHAF Maine Health Access Foundation	Grant No:							
	Agency:							
	Project Title:							
	Grant Period:		1/1/XX	to	12/31/20XX			
Report Period:			to					
INTEGRATION INITIATIVE - FINANCIAL REPORTING FORM								
	MeHAF Funds		Provided by Other Sources**		Provided by Grantee		Total Project Budget	
	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual
INCOME								
Government Grants & Contracts**								
Foundation Funding**								
MeHAF								
Fees/ Earned Income								
Donations								
Other								
TOTAL INCOME	-	-	-	-	-	-	-	-
Expenses								
Personnel								
Wages & Salaries								
Payroll Taxes & Fringe								
Consultants								
Sub-total Personnel	-	-	-	-	-	-	-	-
Direct (Program) Expenses								
Program Partners/ Subcontractors								
Education & Training								
Equipment: Purchase								
Equipment: Rental								
Office Supplies								
Program Materials								
Postage & Courier								
Printing & Copying								
Rent								
Telephone & Internet								
Travel: Local/ Collaborative Mtgs.								
Travel: Other								
Utilities								
Other: (specify)								
Sub-total Direct Expenses	-	-	-	-	-	-	-	-
Indirect Expenses*	-	-	-	-	-	-	-	-
TOTAL EXPENSES	-	-	-	-	-	-	-	-
*A maximum of 15% of personnel & direct expenses								
**Please specify Government Grants & Contracts & Foundation funding. Include contributions from collaborators. Add extra lines if necessary.								



Grant Nr:		
Agency:		
Project Title:		
Grant Period:	1/1/XX	to 12/31/20XX
Report Period:		

INTEGRATION INITIATIVE - FINANCIAL REPORTING FORM

	MeHAF Funds		Provided by Other Sources**		Provided by Gantee		Total Project Budget	
	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual
INCOME								
Government Grants & Contracts**								
Foundation Funding**								
MeHAF								
Fees/ Earned Income								
Donations								
Other								
TOTAL INCOME	-	-	-	-	-	-	-	-
Expenses								
Personnel								
Wages & Salaries								
Payroll Taxes & Fringe								
Consultants								
Sub-total Personnel	-	-	-	-	-	-	-	-
Direct (Program) Expenses								
Program Partners/ Subcontractors								
Education & Training								
Equipment: Purchase								
Equipment: Rental								
Office Supplies								
Program Materials								
Postage & Courier								
Printing & Copying								
Rent								
Telephone & Internet								
Travel: Local/ Collaborative Mtgs.								
Travel: Other								
Utilities								
Other: (specify)								
Sub-total Direct Expenses	-	-	-	-	-	-	-	-
Indirect Expenses*								
TOTAL EXPENSES	-	-	-	-	-	-	-	-

* A maximum of 15% of personnel & direct expenses

**Please specify Government Grants & Contracts & Foundation funding. Include contributions from collaborators. Add extra lines if necessary.

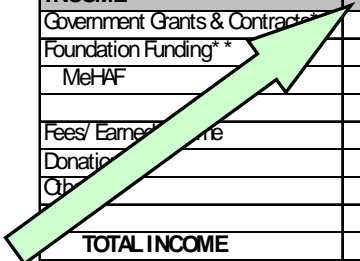
Be sure to include:

- Project #
- Agency Name
- Project Title
- Grant Period
- Reporting Period

Grant No:			
Agency:			
Project Title:			
Grant Period:	1/1/XX	to	12/31/20XX
Report Period:		to	

INTEGRATION INITIATIVE - FINANCIAL REPORTING FORM

	MeHAF Funds		Provided by Other Sources**		Provided by Grantee		Total Project Budget	
	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual
INCOME								
Government Grants & Contracts								
Foundation Funding**								
MeHAF								
Fees/ Earned Income								
Donations								
Other								
TOTAL INCOME	-	-	-	-	-	-	-	-
Expenses								
Personnel								
Wages & Salaries								
Payroll Taxes & Fringe								
Consultants								
Sub-total Personnel	-	-	-	-	-	-	-	-
Direct (Program) Expenses								
Program Partners/ Subcontractors								
Education & Training								
Equipment: Purchase								
Equipment: Rental								
Office Supplies								
Program Materials								
Postage & Courier								
Printing & Copying								
Rent								
Telephone & Internet								
Travel: Local/ Collaborative Mtgs.								
Travel: Other								
Utilities								
Other: (specify)								
Sub-total Direct Expenses	-	-	-	-	-	-	-	-
Indirect Expenses*	-	-	-	-	-	-	-	-
TOTAL EXPENSES	-	-	-	-	-	-	-	-



Include both budgeted and actual income and expenses

*A maximum of 15% of personnel & direct expenses

**Please specify Government Grants & Contracts & Foundation funding. Include contributions from collaborators. Add extra lines if necessary.



Grant No:			
Agency:			
Project Title:			
Grant Period:	1/ 1/ XX	to	12/ 31/ 20XX
Report Period:		to	

INTEGRATION INITIATIVE - FINANCIAL REPORTING FORM

	MeHAF Funds		Provided by Other Sources**		Provided by Grantee		Total Project Budget	
	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual
INCOME								
Government Grants & Contracts**								
Foundation Funding**								
MeHAF								
Fees/ Earned Income								
Donations								
Other								
TOTAL INCOME	-	-	-	-	-	-	-	-
Expenses								
Personnel								
Wages & Salaries								
Payroll Taxes & Fringe								
Consultants								
Sub-total Personnel	-	-	-	-	-	-	-	-
Direct (Program) Expenses								
Program Partners/ Subcontractors								
Education & Training								
Equipment: Purchase								
Equipment: Rental								
Office Supplies								
Program Materials								
Postage & Courier								
Printing & Copying								
Rent								
Telephone & Internet								
Travel: Local/ Collaborative Mtgs.								
Travel: Other								
Utilities								
Other: (specify)								
Sub-total Direct Expenses	-	-	-	-	-	-	-	-
Indirect Expenses*	-	-	-	-	-	-	-	-
TOTAL EXPENSES	-	-	-	-	-	-	-	-

*A maximum of 15% of personnel & direct expenses


**Please specify Government Grants & Contracts & Foundation funding. Include contributions from collaborators. Add extra lines if necessary.

List all sources of income for your project – budgeted and actual

List direct expenses for your project.

Direct expenses are costs that can be specifically identified with the project or program and are allowable under the grant

(refer to your approved proposal budget)


 MeHAF Maine Health Access Foundation	Grant No:							
	Agency:							
	Project Title:							
	Grant Period:	1/ 1/ XX	to	12/ 31/ 20XX				
	Report Period:		to					
INTEGRATION INITIATIVE - FINANCIAL REPORTING FORM								
	MeHAF Funds		Provided by Other Sources**		Provided by Grantee		Total Project Budget	
	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual
INCOME								
Government Grants & Contracts**								
Foundation Funding**								
MeHAF								
Fees/ Earned Income								
Donations								
Other								
TOTAL INCOME	-	-	-	-	-	-	-	-
Expenses								
Personnel								
Wages & Salaries								
Payroll Taxes & Fringe								
Consultants								
Sub-total Personnel	-	-	-	-	-	-	-	-
Direct (Program) Expenses								
Program Partners/ Subcontractors								
Education & Training								
Equipment: Purchase								
Equipment: Rental								
Office Supplies								
Program Materials								
Postage & Courier								
Printing & Copying								
Rent								
Telephone & Internet								
Travel: Local/ Collaborative Mtgs.								
Travel: Other								
Utilities								
Other: (specify)								
Sub-total Direct Expenses	-	-	-	-	-	-	-	-
Indirect Expenses*								
TOTAL EXPENSES	-	-	-	-	-	-	-	-
*A maximum of 15% of personnel & direct expenses								
**Please specify Government Grants & Contracts & Foundation funding. Include contributions from collaborators. Add extra lines if necessary.								

Indirect costs are costs which are incurred by an organization in the execution of its activities but which cannot be identified with a particular activity.

Indirect expenses do not need to be itemized

MeHAF's indirect cost rate is 15% of personnel and direct expenses



 MeHAF Maine Health Access Foundation	Grant No:							
	Agency:							
	Project Title:							
	Grant Period:		1/1/XX	to		12/31/20XX		
Report Period:				to				
INTEGRATION INITIATIVE - FINANCIAL REPORTING FORM								
	MeHAF Funds		Provided by Other Sources**		Provided by Grantee		Total Project Budget	
	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual
INCOME								
Government Grants & Contracts**								
Foundation Funding**								
MeHAF								
Fees/ Earned Income								
Donations								
Other								
TOTAL INCOME	-	-	-	-	-	-	-	-
Expenses								
Personnel								
Wages & Salaries								
Payroll Taxes & Fringe								
Consultants								
Sub-total Personnel	-	-	-	-	-	-	-	-
Direct (Program) Expenses								
Program Partners/ Subcontractors								
Education & Training								
Equipment: Purchase								
Equipment: Rental								
Office Supplies								
Program Materials								
Postage & Courier								
Printing & Copying								
Rent								
Telephone & Internet								
Travel: Local/ Collaborative Mtgs.								
Travel: Other								
Utilities								
Other: (specify)								
Sub-total Direct Expenses	-	-	-	-	-	-	-	-
Indirect Expenses*	-	-	-	-	-	-	-	-
TOTAL EXPENSES	-	-	-	-	-	-	-	-
*A maximum of 15% of personnel & direct expenses								
**Please specify Government Grants & Contracts & Foundation funding. Include contributions from collaborators. Add extra lines if necessary.								

Please refer to your approved proposal budget



Grant No:			
Agency:			
Project Title:			
Grant Period:	1/ 1/ XX	to	12/ 31/ 20XX
Report Period:		to	

Include your total project budget

INTEGRATION INITIATIVE - FINANCIAL REPORTING FORM

	MeHAF Funds		Provided by Other Sources**		Provided by Grantee		Total Project Budget	
	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual
INCOME								
Government Grants & Contracts**								
Foundation Funding**								
MeHAF								
Fees/ Earned Income								
Donations								
Other								
TOTAL INCOME	-	-	-	-	-	-	-	-
Expenses								
Personnel								
Wages & Salaries								
Payroll Taxes & Fringe								
Consultants								
Sub-total Personnel	-	-	-	-	-	-	-	-
Direct (Program) Expenses								
Program Partners/ Subcontractors								
Education & Training								
Equipment: Purchase								
Equipment: Rental								
Office Supplies								
Program Materials								
Postage & Courier								
Printing & Copying								
Rent								
Telephone & Internet								
Travel: Local/ Collaborative Mtgs.								
Travel: Other								
Utilities								
Other: (specify)								
Sub-total Direct Expenses	-	-	-	-	-	-	-	-
Indirect Expenses*	-	-	-	-	-	-	-	-
TOTAL EXPENSES	-	-	-	-	-	-	-	-

- Check totals
- Check addition

*A maximum of 15% of personnel & direct expenses
 **Please specify Government Grants & Contracts & Foundation funding. Include contributions from collaborators. Add extra lines if necessary.

Project Number:	2007SAMPLE-0012		
Agency:	Foundation Health Care		
Project Title:	Integration of Mental Health and Primary Care		
Grant Period:	1/ 1/ 2008	to	12/ 31/ 2008
Report Period:	1/ 1/ 2008	to	12/ 31/ 2008

MAJOR GRANTS PROGRAM - FINANCIAL REPORTING FORM

	MeHAF Funds		Other Funding Sources		Grantee Funds/ In-Kind		Total Period Expenditures	
	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual
INCOME								
Government Grants & Contracts			75,000.00	50,000.00			75,000.00	50,000.00
Foundation Funding								-
MeHAF	99,935.00	99,935.00					99,935.00	99,935.00
Other (Bingham Program)			15,000.00	10,000.00			15,000.00	10,000.00
United Way								
Fees/ Earned Income								
Donations								
In-Kind					15,000.00	40,000.00	15,000.00	40,000.00
Other								
TOTAL INCOME	99,935.00	99,935.00	90,000.00	60,000.00	15,000.00	40,000.00	204,935.00	199,935.00
Expenses								
Personnel								
Wages & Salaries	40,000.00	40,000.00	20,000.00	16,000.00	12,000.00	12,000.00	72,000.00	68,000.00
Payroll Taxes & Fringe	10,000.00	10,000.00	5,000.00	4,000.00	3,000.00	3,000.00	18,000.00	17,000.00
Consultants	12,000.00	12,000.00	15,000.00	15,000.00			27,000.00	27,000.00
Sub-total Personnel	62,000.00	62,000.00	40,000.00	35,000.00	15,000.00	15,000.00	117,000.00	112,000.00
Direct (Program) Expenses								
Equipment: Purchase	4,500.00	4,500.00	50,000.00	25,000.00	-	25,000.00	54,500.00	54,500.00
Equipment: Rental	-	-						-
Office Supplies	900.00	900.00					900.00	900.00
Program Materials	8,000.00	8,000.00					8,000.00	8,000.00
Postage & Courier	1,200.00	1,200.00					1,200.00	1,200.00
Printing & Copying	1,500.00	1,500.00					1,500.00	1,500.00
Rent	1,200.00	1,200.00					1,200.00	1,200.00
Telephone & Internet	800.00	800.00					800.00	800.00
Travel: Local	2,500.00	2,500.00					2,500.00	2,500.00
Travel: Other	4,000.00	4,000.00					4,000.00	4,000.00
Utilities	300.00	300.00					300.00	300.00
Other: (specify)								-
								-
								-
Sub-total Direct Expenses	24,900.00	24,900.00	50,000.00	25,000.00	-	25,000.00	74,900.00	74,900.00
Indirect Expenses*	13,035.00	13,035.00	-	-	-	-	13,035.00	13,035.00
TOTAL EXPENSES	99,935.00	99,935.00	90,000.00	60,000.00	15,000.00	40,000.00	204,935.00	199,935.00

*A maximum of 15% of personnel & direct expenses

**Please specify Government Grants & Contracts & Foundation funding. Add extra lines if necessary.

Sample Financial Report

Project has other funding sources, as well as in-kind support

Expenses appear to be appropriate for the project

Income = Expenses


(However, for your interim report, this most likely won't be the case)

Financial Reporting – Red Flags

- Expenses significantly under-spent
- Budget reallocations of more than 10% without Foundation approval
- Unexpended funds



Example:
 expenses
 significantly
 under-spent

 MeHAF Maine Health Access Foundation	Project Number	2007SAMPLE0012		
	Agency:	Foundation Health Care		
	Project Title:	Integration of Mental Health and Primary Care		
	Grant Period:	1/1/2008	to	12/31/2008
	Report Period:	1/1/2008	to	6/30/2008

MAJOR GRANTS PROGRAM - FINANCIAL REPORTING FORM

	MeHAF Funds		Other Funding Sources		Grantee Funds/ In-Kind		Total Period Expenditures	
	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual
INCOME								
Government Grants & Contracts			75,000.00	50,000.00			75,000.00	50,000.00
Foundation Funding								-
MeHAF	99,935.00	99,935.00					99,935.00	99,935.00
Other (Bingham Program)			15,000.00	10,000.00			15,000.00	10,000.00
United Way								
Fees/ Earned Income								
Donations								
In-Kind					15,000.00	40,000.00	15,000.00	40,000.00
Other								
TOTAL INCOME	99,935.00	99,935.00	90,000.00	60,000.00	15,000.00	40,000.00	204,935.00	199,935.00
Expenses								
Personnel								
Wages & Salaries	40,000.00	5,000.00	20,000.00	16,000.00	12,000.00	12,000.00	72,000.00	33,000.00
Payroll Taxes & Fringe	10,000.00	1,000.00	5,000.00	4,000.00	3,000.00	3,000.00	18,000.00	8,000.00
Consultants	12,000.00	-	15,000.00	15,000.00			27,000.00	15,000.00
Sub-total Personnel	62,000.00	6,000.00	40,000.00	35,000.00	15,000.00	15,000.00	117,000.00	56,000.00
Direct (Program) Expenses								
Equipment: Purchase	4,500.00	-	50,000.00	25,000.00	-	25,000.00	54,500.00	50,000.00
Equipment: Rental	-							-
Office Supplies	900.00	150.00					900.00	150.00
Program Materials	8,000.00	1,000.00					8,000.00	1,000.00
Postage & Courier	1,200.00	100.00					1,200.00	100.00
Printing & Copying	1,500.00	-					1,500.00	-
Rent	1,200.00	600.00					1,200.00	600.00
Telephone & Internet	800.00	400.00					800.00	400.00
Travel: Local	2,500.00	1,000.00					2,500.00	1,000.00
Travel: Other	4,000.00	-					4,000.00	-
Utilities	300.00	150.00					300.00	150.00
Other: (specify)								-
								-
								-
Sub-total Direct Expenses	24,900.00	3,400.00	50,000.00	25,000.00	-	25,000.00	74,900.00	53,400.00
Indirect Expenses*	13,035.00	1,410.00	-	-	-	-	13,035.00	13,035.00
TOTAL EXPENSES	99,935.00	10,810.00	90,000.00	60,000.00	15,000.00	40,000.00	204,935.00	122,435.00

*A maximum of 15% indirect expenses

**Please specify Government Grants & Contracts & Foundation funding. Add extra lines if necessary.

Project Number	2004SAMPLE0012		
Agency:	Foundation Health Care		
Project Title:	Universal Access to Health Care		
Grant Period:	9/ 1/ 03	to	8/ 31/ 04
Report Period:	9/ 1/ 03	to	8/ 31/ 04

Example:
 reallocation of
 more than 10%

MAJOR GRANTS PROGRAM - FINANCIAL REPORTING FORM

	MeHAF Funds		Other Funding Sources		Grantee Funds/ In-Kind		Total Period Expenditures	
	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual
INCOME								
Government Grants & Contracts			75,000.00	50,000.00			75,000.00	50,000.00
Foundation Funding								-
MeHAF	99,935.00	99,935.00					99,935.00	99,935.00
Other (Bingham Program)			15,000.00	10,000.00			15,000.00	10,000.00
United Way								
Fees/ Earned Income								
Donations								
In-Kind					15,000.00	40,000.00	15,000.00	40,000.00
Other								
TOTAL INCOME	99,935.00	99,935.00	90,000.00	60,000.00	15,000.00	40,000.00	204,935.00	199,935.00
Expenses								
Personnel								
Wages & Salaries	40,000.00	25,000.00	20,000.00	10,000.00	12,000.00	12,000.00	72,000.00	53,000.00
Payroll Taxes & Fringe	10,000.00	8,000.00						1,000.00
Consultants	12,000.00	29,000.00	15,000.00	15,000.00			27,000.00	44,000.00
Sub-total Personnel	62,000.00	62,000.00	40,000.00	35,000.00	15,000.00	15,000.00	117,000.00	112,000.00
Direct (Program) Expenses								
Equipment: Purchase	4,500.00	4,500.00	50,000.00	25,000.00	-	25,000.00	54,500.00	54,500.00
Equipment: Rental	-	-						-
Office Supplies	900.00	900.00					900.00	900.00
Program Materials	8,000.00	5,000.00					8,000.00	5,000.00
Postage & Courier	1,200.00	1,200.00					1,200.00	1,200.00
Printing & Copying	1,500.00	4,500.00					1,500.00	4,500.00
Rent	1,200.00	1,200.00					1,200.00	1,200.00
Telephone & Internet	800.00	800.00					800.00	800.00
Travel: Local	2,500.00	2,500.00					2,500.00	2,500.00
Travel: Other	4,000.00	4,000.00					4,000.00	4,000.00
Utilities	300.00	300.00					300.00	300.00
Other: (specify)								-
								-
								-
Sub-total Direct Expenses	24,900.00	24,900.00	50,000.00	25,000.00	-	25,000.00	74,900.00	74,900.00
Indirect Expenses*	13,035.00	13,035.00	-	-	-	-	13,035.00	13,035.00
TOTAL EXPENSES	99,935.00	99,935.00	90,000.00	60,000.00	15,000.00	40,000.00	204,935.00	199,935.00

*A maximum of 15% of personnel & direct expenses

**Please specify Government Grants & Contracts & Foundation funding. Add extra lines if necessary.

Example:
unexpended
funds

MeHAF		Project Number		2004SAMPLE-0012					
Maine Health Access Foundation		Agency:		Foundation Health Care					
		Project Title:		Universal Access to Health Care					
		Grant Period:		9/ 1/ 03		to		8/ 31/ 04	
		Report Period:		9/ 1/ 03		to		8/ 31/ 04	
MAJOR GRANTS PROGRAM - FINANCIAL REPORTING FORM									
	MeHAF Funds		Other Funding Sources		Grantee Funds/ In-Kind		Total Period Expenditures		
	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual	
INCOME									
Government Grants & Contracts			75,000.00	50,000.00			75,000.00	50,000.00	
Foundation Funding								-	
MeHAF	99,935.00	99,935.00					99,935.00	99,935.00	
Other (Bingham Program)			15,000.00	10,000.00			15,000.00	10,000.00	
United Way									
Fees/ Earned Income									
Donations									
In-Kind					15,000.00	40,000.00	15,000.00	40,000.00	
Other									
TOTAL INCOME	99,935.00	99,935.00	90,000.00	60,000.00	15,000.00	40,000.00	204,935.00	199,935.00	
Expenses									
Personnel									
Wages & Salaries	40,000.00	35,000.00	20,000.00	16,000.00	12,000.00	12,000.00	72,000.00	63,000.00	
Payroll Taxes & Fringe	10,000.00	8,000.00	5,000.00	4,000.00	3,000.00	3,000.00	18,000.00	15,000.00	
Consultants	12,000.00	12,000.00	15,000.00	15,000.00			27,000.00	27,000.00	
Sub-total Personnel	62,000.00	55,000.00	40,000.00	35,000.00	15,000.00	15,000.00	117,000.00	105,000.00	
Direct (Program) Expenses									
Equipment: Purchase	4,500.00	4,500.00	50,000.00	25,000.00	-	25,000.00	54,500.00	54,500.00	
Equipment: Rental	-	-					-	-	
Office Supplies	900.00	900.00					900.00	900.00	
Program Materials	8,000.00	7,500.00					8,000.00	7,500.00	
Postage & Courier	1,200.00	1,200.00					1,200.00	1,200.00	
Printing & Copying	1,500.00	1,500.00					1,500.00	1,500.00	
Rent	1,200.00	1,200.00					1,200.00	1,200.00	
Telephone & Internet	800.00	800.00					800.00	800.00	
Travel: Local	2,500.00	2,000.00					2,500.00	2,000.00	
Travel: Other	4,000.00	4,000.00					4,000.00	4,000.00	
Utilities	300.00	300.00					300.00	300.00	
Other: (specify)								-	
								-	
								-	
Sub-total Direct Expenses	24,900.00	23,900.00	50,000.00	25,000.00	-	25,000.00	74,900.00	73,900.00	
Indirect Expenses*	13,035.00	11,835.00	-	-	-	-	13,035.00	13,035.00	
TOTAL EXPENSES	99,935.00	90,735.00	90,000.00	60,000.00	15,000.00	40,000.00	204,935.00	191,935.00	

*A maximum of 15% of personnel & direct expenses

**Please specify Government Grants & Contracts Foundation funding. Add extra lines if necessary.



Financial Reporting – Things to Avoid

- No actual in-kind support
- Funding from other sources drastically reduced or not received at all



Example:
Other funding sources not received or drastically reduced

Is your organization able to do the work without this funding?

It looks like:

- You have cut staff
- Didn't hire the consultant
- And didn't purchase the equipment

MeHAF		Project Number		2004SAMPLE0012					
Maine Health Access Foundation		Agency:		Foundation Health Care					
		Project Title:		Univeral Access to Health Care					
		Grant Period:		9/ 1/ 03		to		8/ 31/ 04	
		Report Period:		9/ 1/ 03		to		8/ 31/ 04	
MAJOR GRANTS PROGRAM - FINANCIAL REPORTING FORM									
	MeHAF Funds		Other Funding Sources		Grantee Funds/ In-Kind		Total Period Expenditures		
	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual	
INCOME									
Government Grants & Contracts			75,000.00	-			75,000.00	-	
Foundation Funding									
MeHAF	99,935.00	99,935.00					99,935.00	99,935.00	
Other (Bingham Program)			15,000.00	10,000.00			15,000.00	10,000.00	
United Way									
Fees/ Earned Income									
Donations									
In-Kind					15,000.00	40,000.00	15,000.00	40,000.00	
TOTAL INCOME	99,935.00	99,935.00	90,000.00	10,000.00	15,000.00	40,000.00	204,935.00	149,935.00	
Expenses									
Personnel									
Wages & Salaries	40,000.00	40,000.00	20,000.00	8,000.00	12,000.00	12,000.00	72,000.00	60,000.00	
Payroll Taxes & Fringe	10,000.00	10,000.00	5,000.00	2,000.00	3,000.00	3,000.00	18,000.00	15,000.00	
Consultants	12,000.00	12,000.00	15,000.00	-			27,000.00	12,000.00	
<i>Sub-total Personnel</i>	62,000.00	62,000.00	40,000.00	10,000.00	15,000.00	15,000.00	117,000.00	87,000.00	
Direct (Program) Expenses									
Equipment: Purchase		4,500.00	50,000.00			25,000.00	54,500.00	29,500.00	
Equipment: Rental									
Office Supplies	900.00	900.00					900.00	900.00	
Program Materials	8,000.00	8,000.00					8,000.00	8,000.00	
Postage & Courier	1,200.00	1,200.00					1,200.00	1,200.00	
Printing & Copying	1,500.00	1,500.00					1,500.00	1,500.00	
Rent	1,200.00	1,200.00					1,200.00	1,200.00	
Telephone & Internet	800.00	800.00					800.00	800.00	
Travel: Local	2,500.00	2,500.00					2,500.00	2,500.00	
Travel: Other	4,000.00	4,000.00					4,000.00	4,000.00	
Utilities	300.00	300.00					300.00	300.00	
Other: (specify)									
<i>Sub-total Direct Expenses</i>	24,900.00	24,900.00	50,000.00	-	-	25,000.00	74,900.00	49,900.00	
Indirect Expenses*	13,035.00	13,035.00	-	-	-	-	13,035.00	13,035.00	
TOTAL EXPENSES	99,935.00	99,935.00	90,000.00	10,000.00	15,000.00	40,000.00	204,935.00	149,935.00	

*A maximum of 15% of personnel & direct expenses

**Please specify Government Grants & Contracts & Foundation funding. Add extra lines if necessary.

Project Number:	2007SAMPLE-0012		
Agency:	Foundation Health Care		
Project Title:	Integration of Mental Health and Primary Care		
Grant Period:	1/ 1/ 2008	to	12/ 31/ 2008
Report Period:	1/ 1/ 2008	to	6/ 30/ 2008

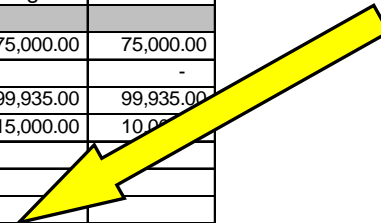
MAJOR GRANTS PROGRAM - FINANCIAL REPORTING FORM

	MeHAF Funds		Other Funding Sources		Grantee Funds/ In-Kind		Total Period Expenditures	
	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual
INCOME								
Government Grants & Contracts			75,000.00	75,000.00			75,000.00	75,000.00
Foundation Funding								-
MeHAF	99,935.00	99,935.00					99,935.00	99,935.00
Other (Bingham Program)			15,000.00	10,000.00			15,000.00	10,000.00
United Way								
Fees/ Earned Income								
Donations								
In-Kind					25,000.00	-	25,000.00	-
Other								
TOTAL INCOME	99,935.00	99,935.00	90,000.00	85,000.00	25,000.00	-	214,935.00	184,935.00
Expenses								
Personnel								
Wages & Salaries	40,000.00	40,000.00	20,000.00	16,000.00	20,000.00	-	80,000.00	56,000.00
Payroll Taxes & Fringe	10,000.00	10,000.00	5,000.00	4,000.00	5,000.00	-	20,000.00	16,000.00
Consultants	12,000.00	12,000.00	15,000.00	15,000.00			27,000.00	27,000.00
Sub-total Personnel	62,000.00	62,000.00	40,000.00	35,000.00	25,000.00	-	127,000.00	97,000.00
Direct (Program) Expenses								
Equipment: Purchase	4,500.00	4,500.00	50,000.00	50,000.00	-	-	54,500.00	54,500.00
Equipment: Rental	-	-						-
Office Supplies	900.00	900.00					900.00	900.00
Program Materials	8,000.00	8,000.00					8,000.00	8,000.00
Postage & Courier	1,200.00	1,200.00					1,200.00	1,200.00
Printing & Copying	1,500.00	1,500.00					1,500.00	1,500.00
Rent	1,200.00	1,200.00					1,200.00	1,200.00
Telephone & Internet	800.00	800.00					800.00	800.00
Travel: Local	2,500.00	2,500.00					2,500.00	2,500.00
Travel: Other	4,000.00	4,000.00					4,000.00	4,000.00
Utilities	300.00	300.00					300.00	300.00
Other: (specify)								-
								-
								-
Sub-total Direct Expenses	24,900.00	24,900.00	50,000.00	50,000.00	-	-	74,900.00	74,900.00
Indirect Expenses*	13,035.00	13,035.00	-	-	-	-	13,035.00	13,035.00
TOTAL EXPENSES	99,935.00	99,935.00	90,000.00	85,000.00	25,000.00	-	214,935.00	184,935.00

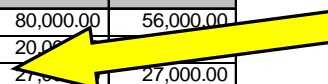
*A maximum of 15% of personnel & direct expenses

**Please specify Government Grants & Contracts & Foundation funding. Add extra lines if necessary.

Example: no in-kind support provided

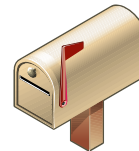


How does eliminating this staff person/time affect the project?



Helpful Hints

- Periodically check where you are financially. Look at what you have spent and what you need to spend during your grant period.
- Check your addition and totals. Have your financial person check your report as well.
- Don't just plug in numbers for the sake of completing your report.
- Communicate, communicate, communicate!



QUESTIONS



If you have questions about your financial report, please contact me.

Cathy Luce

Grants Manager

(207) 620-8266, ext. 104

cluce@mehaf.org