

# **Title II Grant Program POST AWARD**



**DCJS**

Virginia Department of Criminal Justice Services

# What to expect?

- Statement of Grant Award Package (“SOGA”)
- Conditions and Requirements of Grant Program
- Documentation Retention
- Reporting Requirements
- Online Grants Management System (OGMS) items including claims, status reports, encumbrances, and contract amendments
- DCJS Contacts

# Award Package

- Acceptance of the grant award constitutes its agreement that the grantee assumes full responsibility for the management of all aspects of the grant and the activities funded by the grant.
- By signing the Statement of Grant Award/Acceptance, the grantee agrees to comply with all the special conditions outlined.
- Contains the Statement of Grant Award (SOGA).
- The signed SOGA should be sent to the DCJS grants administration division as outlined in the award package (please copy your grant monitor on the email).

# Grant Conditions and Requirements

- All Grant requirements can be found at [www.dcjs.virginia.gov/grants/grant-requirements](http://www.dcjs.virginia.gov/grants/grant-requirements)
- Title II grant conditions include reporting requirements, grant restrictions, contract amendments for the grant program, financial audits, and the reporting schedule.
- Click on Fiscal Year Special Conditions 2022 (Fall)
- FY 23 JJDP

## STATEMENT OF GRANT AWARD (SOGA)

Virginia Department of Criminal Justice Services  
1100 Bank Street, 12<sup>th</sup> Floor  
Richmond, Virginia

Byrne/JAG		
Subgrantee: ABC		
DUNS Number: 12345698	DCJS Grant Number: 0125	
Grant Start Date: 01/01/2021	Grant End Date: 6/30/2022	
Federal Grant Number: 2017-DJ-BX-0482		
Federal Awardee: BJA		
Federal Catalog Number: 16.738		
Project Description: To strengthen Crime Control		
Federal Start Date: 1/1/2022		
Federal Funds:	\$18,750	Indirect Cost Rate: ____%
State General Funds:	\$0	*If applicable
State Special Funds:	\$0	
Agency Match:	\$6,250	
Total Budget:	\$25,000	
<b>Project Director</b>	<b>Project Administrator</b>	<b>Finance Officer</b>
Chief Joe Smith Chief of Police ABC Police Dept. 123 Main Street Richmond, VA 23219 (804) 123-2546 joesmith@gmail.com	Mr. John Smith City Manager 123 Main Street Richmond, VA 23219 (804) 123-2546 citymanager@gmail.com	Ms. Jane Doe Finance Director 123 Main Street Richmond, VA 23219 (804) 123-2546 finance@gmail.com

**\*Please indicate your ICR in the space provided, if applicable.** As the duly authorized representative, the undersigned, having received the Statement of Grant Awards (SOGA) and Special Conditions attached thereto, hereby accepts this grant and agree to the conditions and provisions of all other Federal and State laws and rules and regulations that apply to this award.

Signature: \_\_\_\_\_

Authorized Official (Project Administrator)

Title: \_\_\_\_\_

Date: \_\_\_\_\_

# Title II Specific Conditions of Note

## 40. Required Reports

The sub-grantee agrees to submit, on or before scheduled due dates, such reports as required by DCJS.

For this grant program, DCJS requires an annual reporting to the Bureau of Justice Assistance, Office of Justice Programs (“OJP”), Performance Measuring Tool (“PMT”) Management system to ensure compliance with federal reporting guidelines. Instructions will be discussed prior to the due date.

# Reporting Requirements

- PROGRESS (Status) REPORTS for this grant program are due within 15 days after the end of each calendar quarter and must be approved by your DCJS Grant Monitor. Please reference #40 above for further information.
- BUDGET (Contract) AMENDMENTS – may be submitted for consideration through OGMS. Please review your Special Conditions (and encumbrances) carefully to determine the requirements and procedures for amending budgets. For budget amendment questions, contact your assigned Grant Monitor.
- REQUEST FOR FUNDS- to draw down grant funds a Claim must be submitted via the DCJS OGMS system
- FINANCIAL REPORTS & REIMBURSEMENTS (Claims) If the due date falls on a weekend or non-business day, the report is due on the next business day.
- Closeout – OGMS Detail of Expenditure/Reimbursement forms are due within 45 days after the end of the grant period.

# Documentation Retention

- Records pertinent to the award must be retained for a period of three (3) years from the date of submission of the final expenditure report.
- Sub-grantee must provide access, including performance measurement information, in addition to the financial records, supporting documents, statistical records, and other pertinent records indicated at 2 C.F.R. 200.333.



# Reporting Schedule: Title II

Calendar Quarter Ending	Report Due Dates
12/31/22	01/15/23
03/31/23	04/13/23
06/30/23	07/15/23
09/30/23	10/15/23
12/30/23	01/12/24
03/31/24	04/13/24
06/30/24	07/15/24
09/30/24	10/15/24
12/30/24	1/12/25

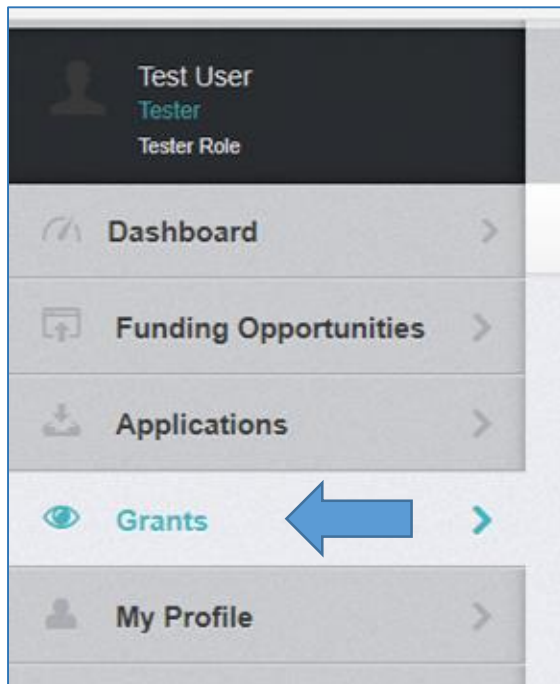
# Register in OGMS

- Every user that manages a DCJS grant will need to register for an account.
- This includes those within your locality that are responsible for submitting a grant application, uploading status reports, entering financial reports, and reimbursements.
- Project Directors, Project Administrators, and Finance Officers are recommended to register.
- Information on how to register for OGMS can be found on the DCJS website at [www.dcjs.virginia.gov/grants/ogms-training-resources](http://www.dcjs.virginia.gov/grants/ogms-training-resources)

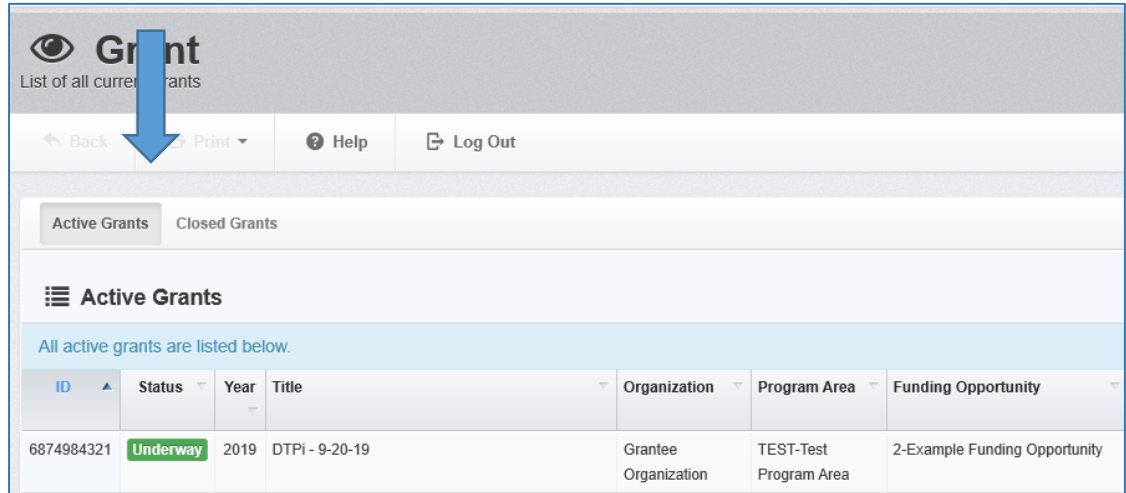
# Accessing your Grant

From the Side Menu:

- Click on 'Grants'



- Select the Grant you would like to access in the 'Active Grants' listing.
- If you need to access a closed grant, click on the 'Closed Grants' tab.



# Accessing your Grant (*continued*)

- Once you have selected the Grant, you will be directed to the 'Grant Components'.
- Components may not be the same for all grant programs.
- 'General Information' is where the Project Director can add additional contacts

☰ Grant Components	
The grant forms appear below.	
Component	
General Information	←
Budget	
Contract Document	
Correspondence	
Status Reports	
Claims	
Contract Amendments	
Encumbrances	
Face Sheet	
FREE - Personnel and Employee Fringe Benefits	
Goals and Objectives	
Monitoring Activities	
Funding Opportunity	
Application	

# Accessing your Grant (*continued*)

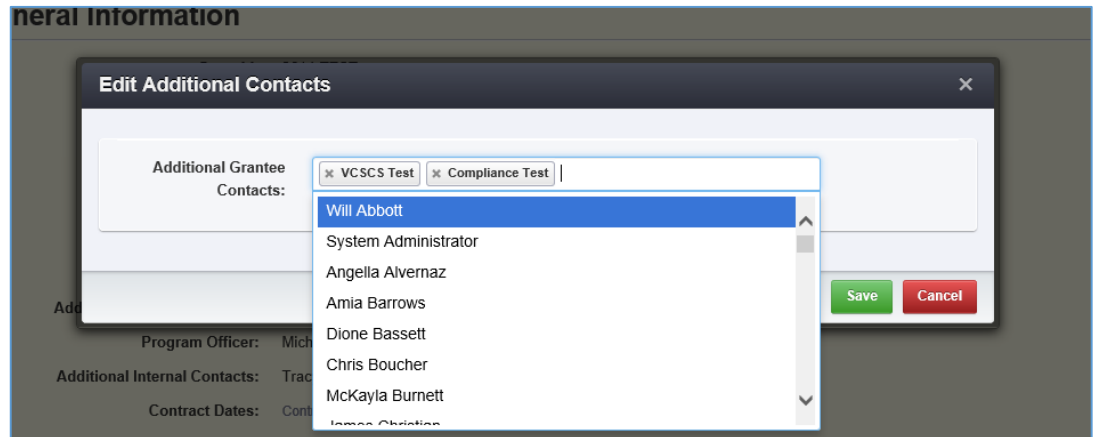
\* Individuals listed as a contact have full access to all grant components.

- To add or remove someone from the grant click 'Edit Additional Contacts'





Edit Additional Contacts

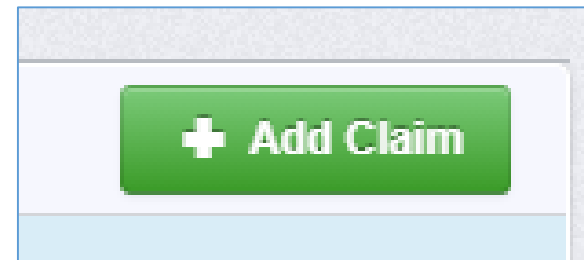
- Click in the box and choose the individual you want to add
- To remove, click the 'x' next to the name in the box



# Starting a Claim

 <b>Grant Components</b>
The grant forms appear below.
Component
General Information
Budget
Contract Document
Correspondence
Status Reports
Claims 
Contract Amendments
Encumbrances
Face Sheet
FREE - Personnel and Employee Fringe Benefits
Goals and Objectives
Monitoring Activities
Funding Opportunity
Application

- Choose 'Claims' from the components list.
- Click 'Add Claim' on the right side of the screen.



# Starting a Claim *(continued)*

- The status will be auto populated
- Type: Reimbursement
- Reporting Period: the beginning and end of the quarter
- Final Request: Do not select 'Yes' unless this is your final quarterly Claim submission
- Click 'Save Form'

**General Information - Claim - Edit** Save Form

In the form below, complete all required fields. Enter the report period of coverage for this claim. All expenses reported on this claim should have been incurred during this period of time. If this is the last claim that will be submitted for this grant, then the Final Request checkbox should be checked.

**Status\*:**

**Type\*:** Reimbursement

**Report Period:** 07/01/2021 09/30/2021

Start Date End Date

**Final Request\*:** Yes No

# Starting a Claim *(continued)*

- Claim number is auto populated
- **Reimbursement** – enter quarterly expenses to be reimbursed and report local match
- **Detail of Expenditures** – describe the funds expended during the quarter

Claim Preview   Alert History   Map   Versions		
🔍 Claim Details		
Component	Complete?	Last Edited
General Information	✓	Apr 16, 2021 12:50 PM - DeAndrea Williams
Reimbursement	-	-
Detail of Expenditures	-	-
Claim Supporting Documentation	-	-



# Reimbursement

- Click 'Edit Reimbursement'
- Enter line item totals
- Click 'Save Reimbursement'

**Reimbursement - Edit**

Save Reimbursement

Budget Category	Contract Budget	Expenses This Period	Prior Expenses (Paid)	Total	Available Balance (Unpaid)	Prior Expenses (Submitted Not Paid)	Total Claimed	Remaining Balance (Unclaimed)	Contract Match	Match Expenses This Period	Prior Match Expenses	Total Match	Remaining Match Requirement	Match Percentage
Budget														
Personnel	\$50,000.00	12500.00	\$0.00	\$0.00	\$50,000.00	\$0.00	\$0.00	\$50,000.00	\$18,800.00	4700.00	\$0.00	\$0.00	\$18,800.00	0.00%
Consultant	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
Travel	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
Subsistence	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,200.00	300.00	\$0.00	\$0.00	\$1,200.00	0.00%
Supplies/Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
Indirect Cost	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
	\$50,000.00	\$0.00	\$0.00	\$0.00	\$50,000.00	\$0.00	\$0.00	\$50,000.00	\$20,000.00	\$0.00	\$0.00	\$0.00	\$20,000.00	??%

Last Edited By: VCSCS Test - Sep 28, 2021 3:17 PM

Save Reimbursement

# Detail of Expenditures

- Must correspond with the expenditures reported in the reimbursement section

Claim Preview Alert History Map Versions		
📄 Claim Details		
Component	Complete?	Last Edited
General Information	✓	Apr 16, 2021 12:50 PM - DeAndrea Williams
Reimbursement	✓	Apr 16, 2021 1:09 PM - DeAndrea Williams
Detail of Expenditures	-	-
Claim Supporting Documentation	-	-

Claim List

Genera

Reimbu

Detail

Detail of Expenditures - Current Version

Personnel Expenditures - Multi-List

Add Row

Description	Federal	State	Special	Cash Match	In-Kind Match	Total
No Data for Table						
Last Edited By: VCSCS Test - Sep 28, 2021 3:45 PM						<div><div></div><div>Add Row</div></div>

# Detail of Expenditures *(continued)*

- 'Personnel Expenditures' should include salary and fringe benefits
- 'Description': Employee's name
- Expenses should be broken down between Special and local match if applicable.

Personnel Expenditures

Delete Row

Save Row

Description\*: Jane Smith- ABC High School

Federal\*: \$0.00

State\*: \$0.00

Special\*: \$12,500.00


Cash Match\*: \$4,700.00

In-Kind Match\*: \$0.00


Total: \$17,200.00

Save Row


# Claim Supporting Documentation


 Claim Supporting Documentation - Other Attachments

[✓ Mark as Complete](#) [+ Add from Doc Repository](#) [+ Add New Attachment](#)

Description	File Name 	Type	Size	Upload Date	Delete
No files attached.					

Last Edited By: DeAndrea Williams - Apr 16, 2021 1:17 PM

 Attach File

 Attach File

[Save File](#) [Cancel](#)

Upload File\*:  [Select file](#)

Description\*:

500 character(s) left

# OGMS Claim Certification Form



DCJS On-line Grants Management System (OGMS)

## OGMS Claim Certification

In our collective effort to ensure compliance and accountability, we ask that you please have your designated Financial Officer sign and return the attached Claim Certification. The signed certification, which will be an ongoing requirement, should be returned through the OGMS Claims component.

I \_\_\_\_\_ certify that this report and the schedules, statements, and expenses for which payment is requested are true, correct and complete and were made in accordance with the appropriate Federal and State Rules and Regulations and that the articles or services listed were (or will be) necessary for and are to be used solely for the purposes specified in the contract for this project. All supporting documentation will be maintained and made available upon request for audit and reconciliation purposes.

Signature:

\_\_\_\_\_  
Authorized Official (Financial Officer)

Title:

\_\_\_\_\_

Date:

\_\_\_\_\_



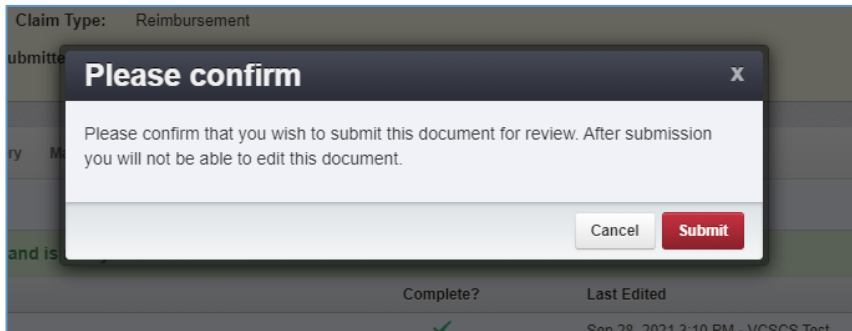
Virginia Department of Criminal Justice Services  
[www.dcjs.virginia.gov](http://www.dcjs.virginia.gov)

# Submitting the Claim

- 'Preview Claim' to verify the amounts in both sections are inline
- Submit Claim
- You are not able to delete a claim but can withdraw

Claim Preview   Alert History   Map   Versions		
🔍 Claim Details		✓ Submit Claim
Component	Complete?	Last Edited
General Information	✓	Apr 16, 2021 12:50 PM - DeAndrea Williams
Reimbursement	✓	Apr 16, 2021 1:09 PM - DeAndrea Williams
Detail of Expenditures	✓	Apr 16, 2021 1:15 PM - DeAndrea Williams
Claim Supporting Documentation	✓	Apr 16, 2021 1:20 PM - DeAndrea Williams

# Submitting the Claim *(continued)*

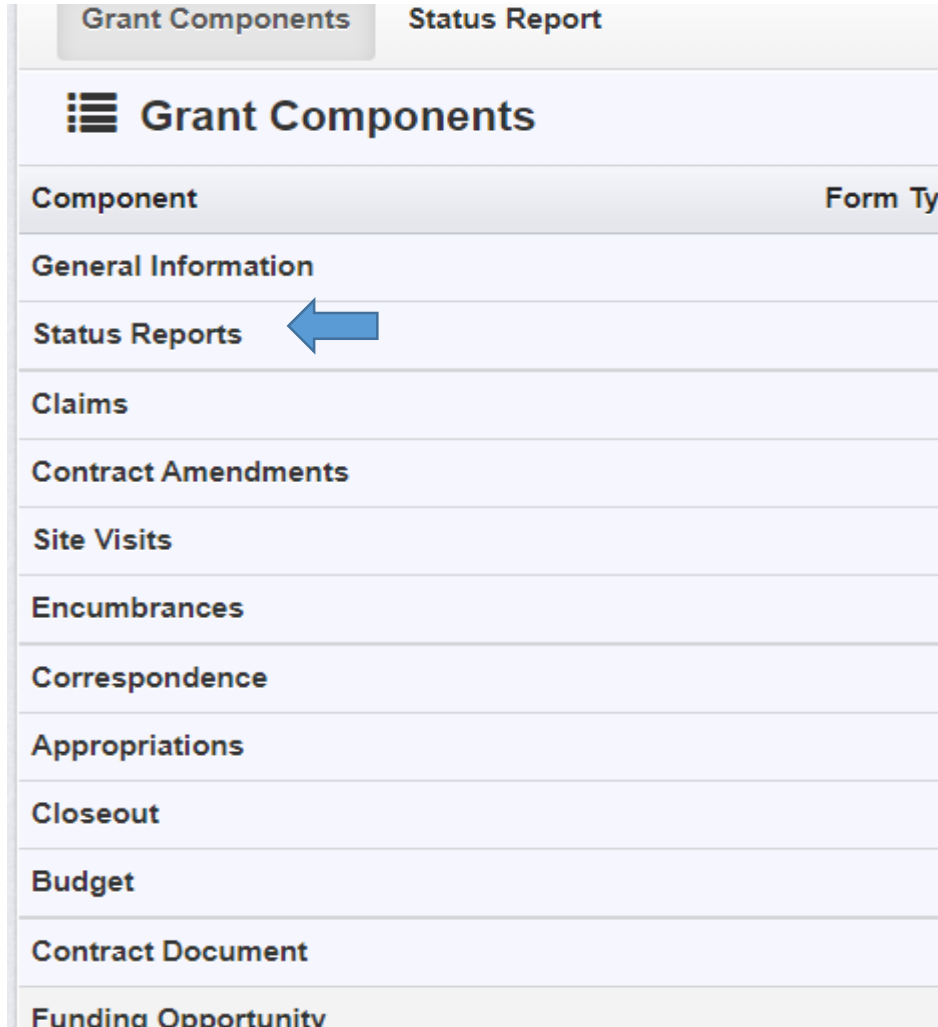


- Verify you wish to submit the claim

- Claim has been submitted

Claims			
All claims associated with this grant appear below.			
ID	Type	Status	Reporting Period
2614-TEST - 001	Reimbursement	Editing	-
2614-TEST - 002	Reimbursement	Submitted	07/01/2021 - 09/30/2021

# Starting a Status Report



The screenshot shows a sidebar menu titled 'Grant Components' with a list of items. A blue arrow points to the 'Status Reports' item.

Component	Form Ty
General Information	
Status Reports	
Claims	
Contract Amendments	
Site Visits	
Encumbrances	
Correspondence	
Appropriations	
Closeout	
Budget	
Contract Document	
Funding Opportunity	

- Choose 'Status Reports' from the components list.
- Click 'Add Status Report' on the right side of the screen.





# Starting a Status Report *(continued)*

- The Status Report will auto populate
- Sub-Type: “Quarterly Report”
- Enter the report dates for the reporting period, e.g., start date: 01-1-22 end date: 03-31-22 (see the reporting schedule for appropriate reporting period dates)

## General Information - Status Report - Edit

 Save Form

In the form below, complete all required fields. Enter the period of coverage for the information detailed on this report. Select the starting day and the ending day. All statuses and activity reported on this report should have occurred during this period of time.

Sub Type\*:


Quarterly Report ▼

Report Dates:

Start Date

End Date


# Submitting Status Report

 **Attachments** - Other Attachments


✓ Mark as Complete

✚ Add from Doc Repository

✚ Add New Attachment

Description	File Name 	Type	Size	Upload Date	Delete
No files attached.					

# Encumbrances

 Grant Components
The grant forms appear below.
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Goals and Objectives
Monitoring Activities
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Application



- Encumbrances are actions that need to be taken before you can implement the project or submit a claim.

# Encumbrances *(continued)*



- Status will let you know if it's been completed
- Compliance Date will tell you when it was approved
- Description will tell you what needs to be done
- Due Date will tell you when you must complete the action by
- Hold Payment, when yes, indicates you will not be able to submit a claim until it has been met

☰ Encumbrances - Multi-List				
Status	Compliance Date	Description	Due Date	Hold Payment
Pending		Provide date of DCJS certification in the category of law enforcement and SRO basic training records for new hire.	08/31/2021	Yes

# Contract Amendments

- Contract Amendments are requests to change the grant
- Any changes must be approved by DCJS before it can take effect
- Types:
  - Budget Revision
  - Amendment
  - Budget Revision
  - In Line Adjustment
  - Change Grant Funded Staff
  - Change in Authorized Official
  - Change in Award Sponsorship
  - Grant Award Period Extension
  - Project Scope of Work Revision
  - Reporting Extension
  - Other

# Contract Amendments *(continued)*

 <b>Grant Components</b>
The grant forms appear below.
Component
General Information
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- Choose 'Contract Amendment' from the components list
- Click 'Add Amendment'


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# Contract Amendments *(continued)*

**General Information - Amendment - Edit** Save Form

In the form below, complete all required fields. Select the appropriate amendment type and enter a short and concise title.

**Status\*:**

**Amendment Type\*:**

**Title\*:**  ×

- General Information will be the same for all amendments
- The status will be auto populated
- Choose the amendment type from the drop down box
- The title should include a brief description of the amendment (e.g., budget amendment request for equipment)

# Contacting DCJS

- Status reports: Grant Monitor
- Goals and Objectives: Grant Monitor
- Contract Amendment: Grant Monitor
- Financial Reporting/Claims: Will Abbott
- OGMS technical support: [ogmssupport@dcjs.virginia.gov](mailto:ogmssupport@dcjs.virginia.gov)
- For financial questions, contact:
  - Will Abbott: (804) 997-5195 or [will.abbott@dcjs.virginia.gov](mailto:will.abbott@dcjs.virginia.gov)



# Who is your main contact person?

- This should be the person who will have day-to-day responsibility for managing the project and who will be the contact if DCJS needs project-related information.
- If this person is different than the one listed as the Project Director on the grant, send name, email address, and phone number to your Grant Monitor.