

Volunteer Florida Foundation Finance

Florida Disaster Fund Grants PER Training

December 8, 2025



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Session Objectives

- Understanding your Grant and Grant Requirements
- Understanding Cost Reimbursement Grants
- Understanding the Match Requirements
- Understanding the Budget Revision Process
- Understanding the Advance Process
- What is the Periodic Expense Report Form (PER)?
- How, when, and where to submit the monthly PER Form
- Understanding the required supporting documentation
- Laserfiche Walk-Through



2025-2026 Contract

- Grant/Contract Period:

December 1, 2025, to November 30, 2026

- Grant Expenditures and Match Expenditures incurred before the start of the grant/contract period or after the end of the grant/contract period will not be allowable.
- Expenditures or match incurred before the end of the grant/contract period but are paid after the end of the grant/contract will be considered allowable expenses.



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Keys to Contract Compliance

- Read your entire Contract
- Follow all applicable Federal or State administrative and audit requirements
- Follow all applicable Florida Statutes and current policies of the State of Florida
- Maintain all grant project records for five (5) years after the end of the fiscal year in which the grant agreement is finalized; or after audit has been finalized
- Pay attention to all Due Dates and Required Reporting



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Contract Requirements

- All required documentation must be on file with Volunteer Florida Foundation before reimbursements will begin
 - Signed contract
 - W9
 - EFT Form
 - Most Recent Audit Report
 - Any other forms as required per contract



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Why Comply?

- Consequences of not adhering to regulations and requirements
 - Audit findings
 - Payback for unallowable costs
 - Not being reimbursed for expenditures
- Consequences of late/incorrect invoices
 - Delay in reimbursement of expenditures
 - Forfeiture of reimbursement of expenditures



What is Cost Reimbursement?



The contract with Volunteer Florida Foundation is a Cost Reimbursement Contract.

This means that all expenditures must first be **PAID** for prior to requesting reimbursement for those expenses.

Each month's invoices must only include expenditures that were paid for during the month.



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Cost Reimbursement



Under the Cost Reimbursement definition, costs are considered to be paid when.....

1. If paid by check, then when the check clears the bank.
2. If paid by credit card, then when the credit card payment is paid and clears the bank.
3. If paid by ACH/EFT, then when the charge clears the bank.



Examples

Scenario: You are putting together your December 2025 invoice and want to know if you can request reimbursement for these expenditures on the December invoice under the cost reimbursement definition provided.

1. Warehouse Rent was paid December 1st for the coverage period of December 1-December 31,2025, and the check cleared the bank on December 18th.
2. Warehouse Rent was paid on December 15th for the coverage period of December 15, 2025 - January 15, 2026, and the check cleared the bank on January 4th.
3. Salary was paid on December 5th for time worked November 17 – November 30, 2025, and cleared the bank December 5th.
4. Salary was paid January 2nd for time worked December 15-28, 2025.
5. A roofing contractor was paid by check on December 15th to begin work and the check cleared the bank the same day.



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Examples

Scenario: You are putting together your December 2025 invoice and want to know if you can request reimbursement for these expenditures on the December invoice under the cost reimbursement definition provided.

6. Equipment was purchased on December 28th with a credit card, and the credit card was paid for on January 28th by ACH and cleared the bank on February 1st.
7. Couches and mattresses were purchased on December 4th with a credit card, and the credit card was paid on December 30th with a check and the check cleared on January 8th.
8. Roofing materials are purchased in November 2025 on a Home Depot credit account and will be used for the approved grant project. The expenses were paid for on December 23, 2025, with cash at Home Depot.
9. Volunteers assisting with the approved project serve hours between the dates of November 15th – December 31st.



Cost Reimbursement Process

- You will submit monthly invoices to the Volunteer Florida Foundation along with your supporting documentation for your expenditures and match
- The Volunteer Florida Foundation will review the invoice request and supporting documentation
- The Volunteer Florida Foundation, per your contract, has forty (40) days from a correct and accurate invoice to provide payment
- If there are questions or further documentation requested, you will receive an email from the Laserfiche portal with those requests



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Cost Reimbursement Process

- Once VF finance staff contacts the program with requested invoice revisions or clarification, the program has **5 calendar days** to submit revisions back to VF office
- If revisions are not received within the **5 calendar days**, VFF will revise the invoice based on costs that they deem allowable based on the supporting documentation and issue payment for the allowable costs
- If there is an expense that you believe VFF should have additional justification to explain the purchase, please include the justification in the invoice submission. In this situation the more documentation provided the better.



Match Requirements

- Per your contract, there is a 50% match
- Can be cash or in-kind, documentation required
- Can use State and Federal funds to match as long as the funders are aware and have approved of the use
- Volunteer Hours can be used for match
 - Hours must be within the contract period of December 1, 2025, to November 30, 2026.
 - Hours must be documented and provided with monthly invoices (VFF can provide a sample form to be used; must include name of volunteer, dates and times of volunteer hours and should be certified with a signature)
 - Hours must be valued at the \$33.00 per hour which is the Florida independent sector rate for the value of volunteer hours



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Match Requirements

The concept of matching is that the sub-grantee is basically saying to the grantor:

“If you give us \$1 toward this cause, we promise that we will solicit and receive additional funding, cash or in-kind, to match some or all of that \$1 for the same cause”.



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Match Requirements

It is not enough for the sub-grantee to only show proof that they received the cash donation or grant funds.

The sub-grantee must show proof that they spent the donation in furthering the mission of the grant in support of the approved project in one or more of the PER sections (and must be in the already approved budget)

Must provide the same supporting documentation as they would for reimbursable expenditures.

If you do not meet the required 50% of funds expended, your FDF funds will be decreased to meet the match.

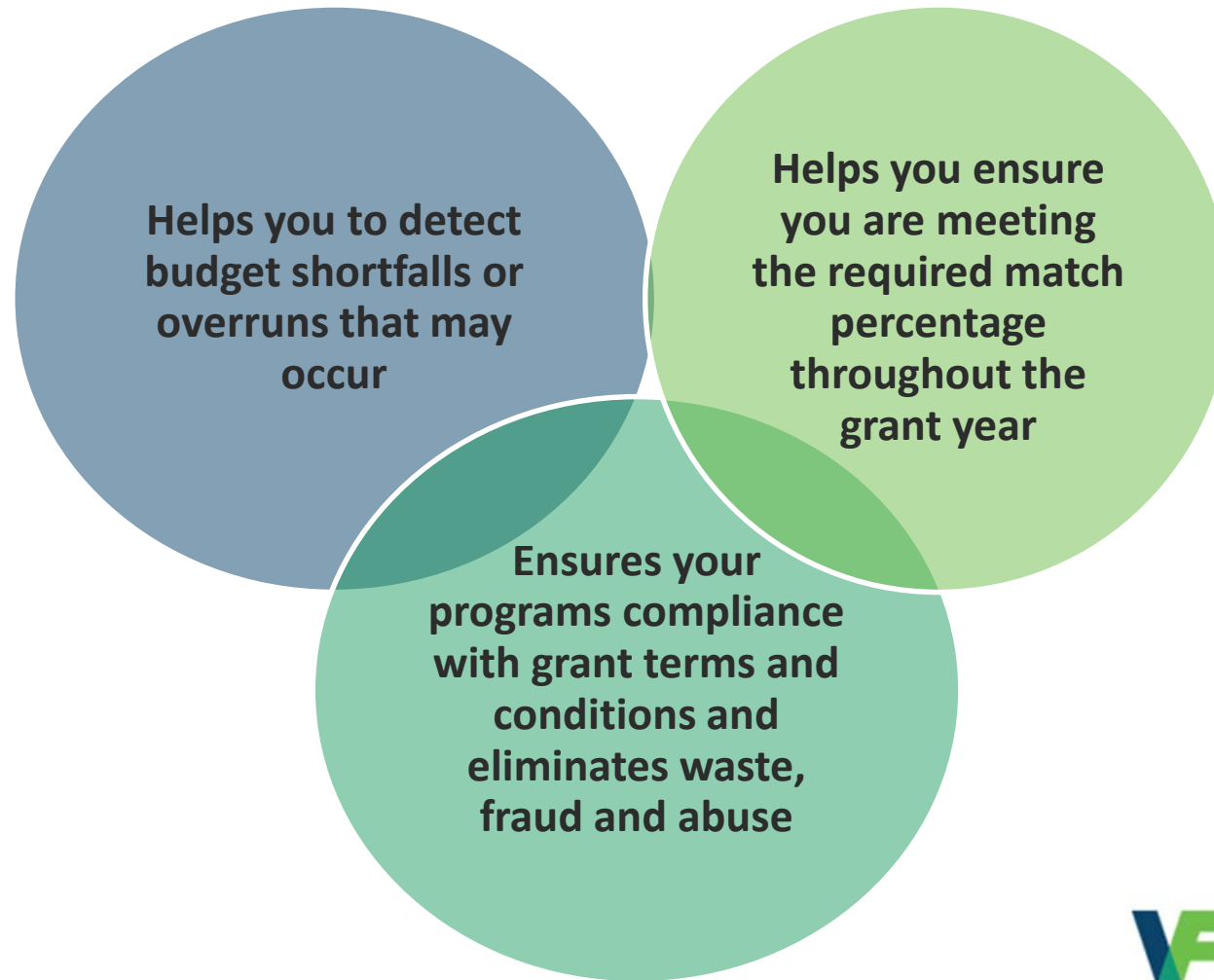
Unallowable Costs

- Expenditures that are not in the approved budget (includes Match Share as well)
- Any expenditures not associated with the approved projects (Capacity Building is not allowable)
- Meals or Mileage reimbursed over the State of Florida Per Diem and Mileage Rates
- Food or beverages, entertainment, snacks, candy, water, flowers, decorations, etc.
- Trainings that do not relate directly to the scope of your project and benefit disaster recovery
- State of Florida Sales Tax
- Staff time and/or benefits without proper documentation of time and effort allocated to the grant
- Gift cards and incentives



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Advantages of Monitoring your Budget



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Advantages of Monitoring your Budget



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Budget Analysis

Review Budget-to-Actuals regularly to avoid cost overruns and shortfalls within all budget cost categories

Identify expenditures not in the approved budget to ensure you are only billing and matching for/with expenditures already approved

Identify expenditures essential to the project that are not in approved budget so a Budget Revision Request Form can be completed and be approved before incurred



10% Rule for Revisions

If you are adding a line or expense that is not already in the approved budget you must complete a Budget Revision Request Form and have it approved prior to purchasing items;

If the line or expense is already in approved budget but the cost exceeds 10% or less than the total budget, a revision would not be necessary;

10% Rule Explained

- The 10% rule refers to if adjustments are needed to the already approved budget and do not exceed 10% of the total budget, then a formal revision request is not required.
- So, for example, let's say your total budget is \$150,000, and say you budgeted \$35,000 for Mattresses, but your actual cost was \$42,000 (difference of \$7,000), then since the difference is less than 10% of the total budget (\$15,000 is 10%), you would not have to complete a budget revision request for this.
- This does not change your budget amounts in any budget category; it would just show that you overspent the already approved line items by an amount under the 10% threshold allowable. This would mean that you will need to underspend in another category to cover the overspent items.
- Now let's say you noticed you didn't budget enough for the Roofing Contractor and instead of \$26,000 it is now costing you \$35,000. That is now a difference of \$9,000. Cumulatively you are now over the 10% threshold by \$1,000 so you are now required to submit a Budget Revision Request to move funds to cover the expense.
- Adding a line item in the budget is not something that is included in the 10% rule. To add something to your budget would require a Budget Revision because that expense was not included in your original approved budget.



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Budget Revision Request Form

LEAD AGENCY:													
PROGRAM:													
PROGRAM YEAR:		2025-2026											
DATE REVISION SUBMITTED:													
		Original Budget			Budget Changes			Revised Budget			Justifications and Calculations		
					(+/-) Increases/(-) Decreases								
		FDF	Match	Total	FDF	Match	Total	FDF	Match	Total			
A. General Administrative and Operating Costs													
		\$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	\$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	\$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	\$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	\$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		
A. Subtotal General Administrative and Operating Costs		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
B. Contractual Costs													
		\$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	\$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	\$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	\$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	\$0.00	\$0.00	\$0.00	\$0.00		
B. Subtotal Contractual Costs		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
C. Materials and Products													
		\$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	\$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	\$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	\$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	\$0.00	\$0.00	\$0.00	\$0.00		
C. Subtotal Materials and Products		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
D. Equipment and Furniture													
		\$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	\$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	\$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	\$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	\$0.00	\$0.00	\$0.00	\$0.00		
D. Subtotal Equipment and Furniture		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
BUDGET TOTALS		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
APPROVED BY:													
Date Revision Request sent to VFF:													
(Following lines to be filled out by VFF staff Only)													
Date Revision Request received by VFF:													

Creating a Budget Revision Request

Complete a Budget Revision Request Form (Exhibit V)

Grantees must sign and date the form prior to submission

Enter Lead Agency, Program Name, Date Revision Submitted at top

Increases/Decreases in Budget Changes columns should total “zero” in the request and include a Justifications/Calculations in last column

Enter the Original Budget using approved Budget in contract package

All Subsequent requests will use the “Revised Budget” from the last previously approved budget revision



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Advance Requests

- Advance Payment Request Form is required
- Requests must not to exceed 20% of the award
- No other payments will be made until the advance funds have been accounted for
- Monthly invoices will be used to account for (offset) the advance funds
- Once the advance funds have been accounted for then reimbursements will continue as cost reimbursement
- If approved, will be issued once all start-up documents have been received and the contracts have been signed, and budgets have been verified and approved



Advance Payment Request Form

Grantee Name _____

Exhibit VIII

Contract # _____

VOLUNTEER FLORIDA FOUNDATION ADVANCE PAYMENT REQUEST FORM

If you are requesting an advance, indicate same by checking the box below.

☐ ADVANCE REQUESTED

Advance payment of \$ _____ is requested.

Any advance payment request cannot exceed 20% of the total award. Advance payments will specify the amount of advance payment needed and provide an explanation of the necessity for and proposed use of these funds. After the initial advance, payment shall be made on a reimbursement basis with supporting documentation.

Complete the following chart and line item justification below.

For each line item, provide a detailed justification explaining the need for the advance payment. Support documentation should include quotes for purchases, delivery timelines, salary and expense projections, etc. to provide the Volunteer Florida Foundation reasonable and necessary support for the requested advance funds.

Authorized Signature

Printed Name

Title

Date



Advance Payment Request Form

Grantee Name _____

Contract # _____

Estimated Expenses

BUDGET CATEGORY/LINE ITEMS (list applicable line items)	Justification
<u>General Administrative and Operating Costs</u>	
<u>Contractual Costs</u>	
<u>Materials and Products</u>	
<u>Equipment/Furniture/Fixtures</u>	
TOTAL EXPENSES	

VF Emergency Management Director Signature

Date Approved

VF Finance Staff Initials

Periodic Expenditure Report (Reimbursement Invoice, Monthly Invoice, PER)

- The “Reimbursement Invoice” as noted in the contract, is a form that you will use to submit your monthly reimbursement requests and match expenditures
- Referred to as the Periodic Expense Report (PER)
- Form **must** be submitted with each invoice and include both reimbursable expenditures and include the match expenditures reported for each month
- Must be submitted to our online invoice submission portal, Laserfiche



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LEGAL APPLICANT (LEAD AGENCY):			
PROGRAM:			
INVOICE DATES		TO	
PROGRAM YEAR:	2025-2026		
	MONTHLY INVOICE		
	FDRF	Match	Total
A. General Administrative and Operating Costs (Salaries, Fringe Benefits, Travel, Rent, (non-tangibles) etc. not to exceed 10% of the total grant - list each item separately below)			
	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00
A. General Administrative and Operating Costs	\$0.00	\$0.00	\$0.00
B. Contractual Costs (includes costs for hiring of contractors in completing tasks/projects - list each item separately below)			
	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00
B. Contractual Costs	\$0.00	\$0.00	\$0.00
C. Materials and Products (includes supplies/materials purchased to complete tasks/projects(nails, wood, roofing, etc. - list each item separately below)			
	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00
C. Materials and Products	\$0.00	\$0.00	\$0.00
D. Equipment/Furniture/Fixtures (includes equipment/furniture/fixtures to complete tasks/projects (air conditioning units, desks, computers, plumbing, etc. - list each item separately below)			
	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00
D. Equipment/Furniture	\$0.00	\$0.00	\$0.00
SUBTOTAL	\$0.00	\$0.00	\$0.00
TOTAL PER AMOUNTS:	\$0.00	\$0.00	\$0.00
FDRF / Match Share:	#DIV/0!	#DIV/0!	#DIV/0!
APPROVED BY (must be typed or signed by program) :			
Date PER sent to Volunteer Florida Foundation			

Dates to Remember

- First invoices are due to the Volunteer Florida Foundation forty-five (45) days after contract execution
 - January 14, 2026
- After the first invoice, all invoices are due no later than the 15th of each month
 - Extensions may be requested in writing to VFF prior to the due date
- Final invoices are due to VFF no later than forty-five (45) days after the contract has ended
 - End of contract is November 30, 2026
 - November invoice will be due December 15, 2026
 - Any Final invoices due by January 14, 2027



Supporting Documentation

- **Personnel Expenses**

- PER Worksheet

- List each employee on the invoice. Add rows/lines if needed

- Supporting documentation required:

- **Timesheets** – signed and dated by employee and supervisor, have a certification statement and must clearly note the FDF hours – must match the pay periods for the pay dates
 - **Payroll registers or copies of salary warrants** (paystubs, etc.) – must note the pay period dates and the pay dates and show it cleared the account.



Supporting Documentation

- **Personnel Fringe Benefits**

- PER Worksheet

- List each benefit separately: FICA, Health, Retirement, etc.
 - Create a row/line for each benefit as needed.

- Supporting documentation required:

- **Payroll registers or copies of salary warrants** - showing FICA withholdings and payment cleared the account
 - **Invoice(s)** for health care and other benefits with complete listing of employees and premiums – must note the coverage period
 - **Proof of Payment** (example: copies of cleared checks, ACH online confirmation of payment) – must have payment date and amount paid



Supporting Documentation

- **Travel**
 - PER Worksheet
 - Calculate and list travel by staff each on a separate line
 - Supporting documentation required:
 - **Travel Reimbursement Form** - signed and dated by employee and supervisor; should include arrival and departure times
 - **Proof of Payment** for reimbursement (copies of cleared checks) – must have payment date and amount
 - For credit card purchases – A copy of **credit card statement** and **proof of payment** for the credit card must be provided and you must show it cleared the account.



Travel

- Maximum mileage reimbursement rate is **\$0.445 per mile** and must show that it was most cost efficient
- No reimbursement for mileage and gas
- Meals cannot exceed state of Florida per diem rates.
 - Breakfast – cannot exceed \$6 per person
 - Lunch – cannot exceed \$11 per person
 - Dinner – cannot exceed \$19 per person

To claim breakfast travel must begin before 6:00 a.m. and go beyond 8:00 a.m.

To claim lunch travel must begin before 12:00 p.m. and go beyond 2:00 p.m.

To claim dinner travel must begin before 6:00 p.m. and go beyond 8:00 p.m.



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Supporting Documentation

- **Materials and Products/Equipment, Furniture, Fixtures**
 - PER Worksheet
 - Itemize each group of supplies purchased
 - Be very detailed
 - Add rows in the PER invoice to match your organization's expenses
 - Supporting documentation required:
 - **Invoice(s)** – detailed receipts must identify all items purchased
 - **Proof of Payment** – copies of cleared checks – must have payment date and amount
 - For credit card purchases – copy of **credit card statement** and **proof of payment** for the credit card must be provided (must have cleared the account)



Supporting Documentation

- **Contractual Costs**

- PER Worksheet
 - List each on a separate line
- Supporting documentation required:
 - **Copy of Contract** -identifying services and objectives
 - **Invoice(s)** – detailed receipts must identify all purchases
 - **Proof of Payment** – copies of cleared checks – must have payment date and amount
 - Credit card purchases – copy of **credit card statement** and **proof of payment** for the credit card must be provided (must have cleared the account)



Supporting Documentation

- **Other General Administrative and Operating Costs**
 - PER Worksheet
 - Itemize each costs for other program operating expenses
 - Add rows to the PER invoice to match your organization's expenses
 - Supporting documentation required:
 - Rent – copy of lease agreement which clearly identifies service location, rental agreement period, and monthly/annual cost
 - All Invoice(s)/Billing Statements – must clearly identify the type of service, service period, and service location
 - Proof of payment – copies of cleared checks -- must have payment date and amount
 - Credit card purchases – copy of credit card statement and proof of payment for the credit card must also be provided (must have cleared the account)



Questions? Comments? Concerns?



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Laserfiche Training

*Invoice Submission and
Documentation Portal Training*



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Session Objectives

Know the Laserfiche Submission Portals and Web Addresses

Understand How to Use the Invoice Submission Portal

Understand How to Use the Invoice Update Portal

Laserfiche Invoice Submission Portal

<https://volunteerfl.mccicloud.io/Forms/SGP>

Sub-grantee Submission Portal

****This is the Portal that will be used for all ORIGINAL Invoice Submissions each month**

PER Information

Funding Source*

Florida Disaster Fund ▾

PER Month*

▾

Value is required.

PER Year*

2025-2026 ▾

**Sub-Grantee
Organization***

▾

**Supporting
Documents***

Upload

Drag and drop documents here to upload them with the submission. Please note only PDFs and Excel documents can be uploaded.

Submitter Information

First Name***Last Name*****Title****Email*****Phone Number***

Format is XXX-XXX-XXXX.

Submit

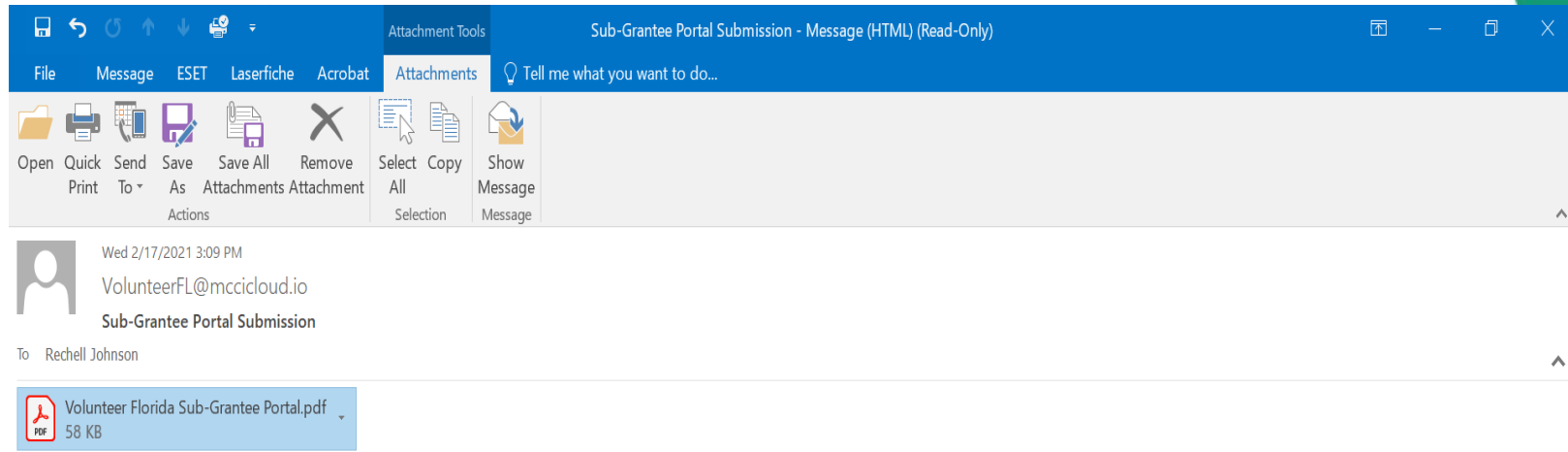
Step-by-Step PER Information

- Choose your funding source by clicking on the dropdown arrow (*Florida Disaster Fund*)
- *Choose PER Month by clicking on the dropdown arrow (Invoice Month you are Submitting)*
- Choose PER Year by clicking on the dropdown arrow (*2025-2026*)
- Choose your Organizations name by clicking on the Sub-Grantee Organization dropdown arrow
- You will then Upload your file by clicking on the Upload Button and adding file from documents (or you can click on file and drag it into the Supporting Documents field)

Step-by-Step Submitter Information

- Enter the Submitter's First Name
- Enter the Submitter's Last Name
- Title is an Optional Field
- Enter the Submitter's Email Address
- Enter the Submitter's Phone Number
- Click on Submit

Sample Submission Confirmation Email



Rechell-

Thank you for submitting your PER for 01-January/2021. Your Instance ID is 78. Please use this if you need to update your submission. Thank you.

-Rechell Johnson

Financial Analyst

T: 850.414.7400

M: 850.294.4752

Rechell@volunteerflorida.org

www.volunteerflorida.org



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Sample Submission Update Requested Email

Sub-Grantee Submission Update Requested - Message (HTML) (Read-Only)

File Message ESET Laserfiche Acrobat Tell me what you want to do...

Ignore Delete Reply Reply Forward Meeting
All

Quick Steps Move Tags Editing Zoom OneNote

Wed 2/17/2021 3:35 PM
VolunteerFL@mccicloud.io
Sub-Grantee Submission Update Requested

To: Rechell Johnson

Volunteer Florida Sub-Grantee Portal.pdf
59 KB

Good Morning/Afternoon-

Thank you for submitting your monthly invoice. We have reviewed your invoice submission and have the following comments and or requests for further clarification:

- **Update**
- **This**
- **Now**

Please provide the requested information and documentation no later than the close of business five (5) business days after this email has been sent.

If we do not receive the requested information by this date, we will remove the expenses in question and process your invoice.

You may submit the update [by clicking here](#). Your Instance ID is 78. The rest of the information you'll need to fill out the Update is contained in the attached document.

Please let me know if you have any questions or concerns regarding this request.

Laserfiche Invoice Update Portal

<https://volunteerfl.mccicloud.io/forms/SGUP>

Sub-grantee Update Portal

****This is the Portal that will be used for all
UPDATES to invoices and additional
documentation or clarification requests.**



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Sub-Grantee Update Portal

Note: If you're not sure what information to put in, please refer to the email request for an update to your submission.

Instance ID*

78

Funding Source*

Florida Disaster Fund



PER Month*



PER Year*

2025-2026



**Sub-Grantee
Organization***



**Email Used For
Submission***

**Corrected
Documents***

Upload

Submit



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Step-By-Step Update Portal

- Enter your Instance ID Number from the Confirmation Email
- Choose your Funding Source by clicking on the dropdown arrow
- Choose the PER Month for the invoice you are responding to by clicking on the dropdown arrow
- Choose the PER Year for the invoice you are responding to by clicking on the dropdown arrow
- Choose the Organizations Name from the Sub-Grantee Organization dropdown arrow
- Enter the Submitter's Email Address from the original submission
- Upload the requested and corrected documents
- Click on Submit

Finance Contact Information

Tracie Lambright, Deputy Finance Director

Tracie@volunteerflorida.org

(850) 294-3856

Jenelle Jones, Financial Analyst

Jenelle@volunteerflorida.org

(850) 294-3669



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Questions

Do calendar days include holidays and weekends for the PER updates?

Yes, holidays and weekends are counted, however, communication is key. If your organization can't submit updates within the 5 day window, due to office closures or delays, please contact the finance team with an update.

For the justification for salary toward the project, do we submit the notes in the PER or do we need to submit a separate report about tasks performed as documentation?

The PER will ask for time sheet documentation to confirm what hours are being assigned to the grant. A separate programmatic report will be requested quarterly looking for more information on the actual functions associated with the grant, including any work related to salaries paid with the grant or match.



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Questions

If there are no expenses or match in a month, do we still submit an invoice?

Submission of a PER is not required, however, please reach out to the finance team to notify that grant funds or match were not expensed during the reporting period.



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