MATCHING FUNDS REQUEST FY22 - PROCEDURES

Matching Funds has new procedures for FY22. There is a COVER tab that MUST be submitted along with the claim form(s).

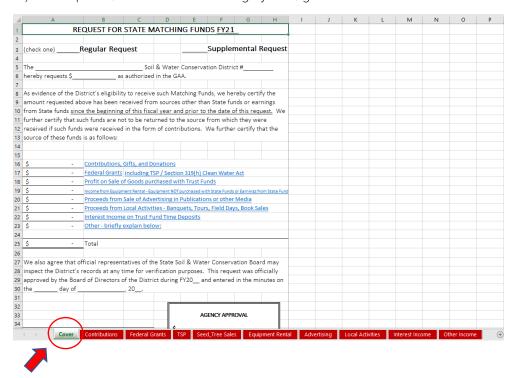
Each line of the COVER tab corresponds to a specific category tab, EXCEPT for the second line that has one for FEDERAL GRANTS and one for TSP. Once you enter the information regarding the funds received, it will automatically calculate the totals not only in that specific category tab but in the COVER tab as well.

Once you have entered all claims, you will email the COVER tab and the form attached to each category tab that you used to the CLAIMS email

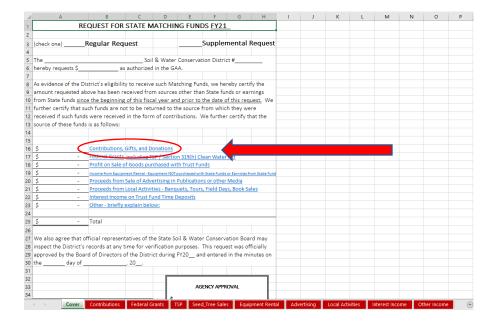
1.) Go to the Financial Form section on our agency's website and open the Matching Funds Request FY22 (Request for Matching Regular and Supplemental Funds). This will open the new COVER tab.

https://www.tsswcb.texas.gov/swcds/swcd-resources

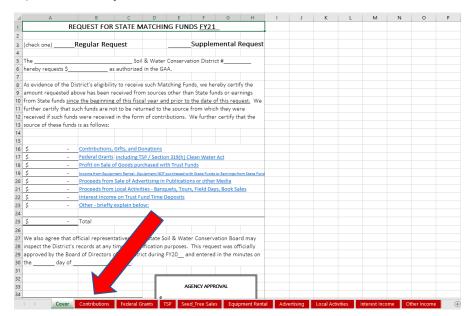
2.) Once opened, there are several category tabs; go to "COVER" tab:



3.) The form looks the same as FY21, there have been small modifications to it – new tabs created and the opportunity to add lines or rows to enter additional information except for TSP, Seed Sales, Tree Sales, Drip Supplies, and Book Sales

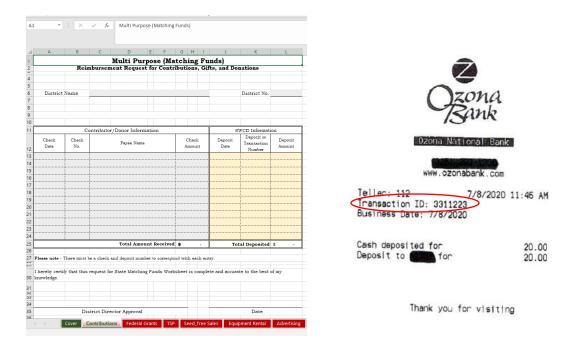


4.) This will take you to the Contributions tab:

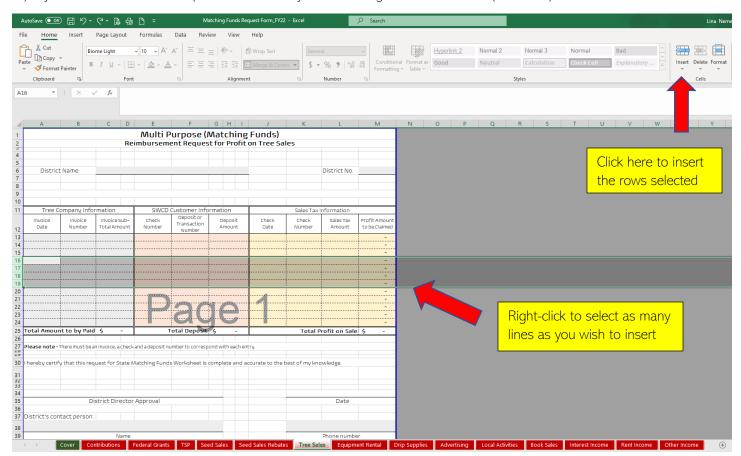


5.) You will fill out the information needed. In the gray section, enter the information regarding the contribution received and the yellow section is for the deposit information regarding that contribution or donation.

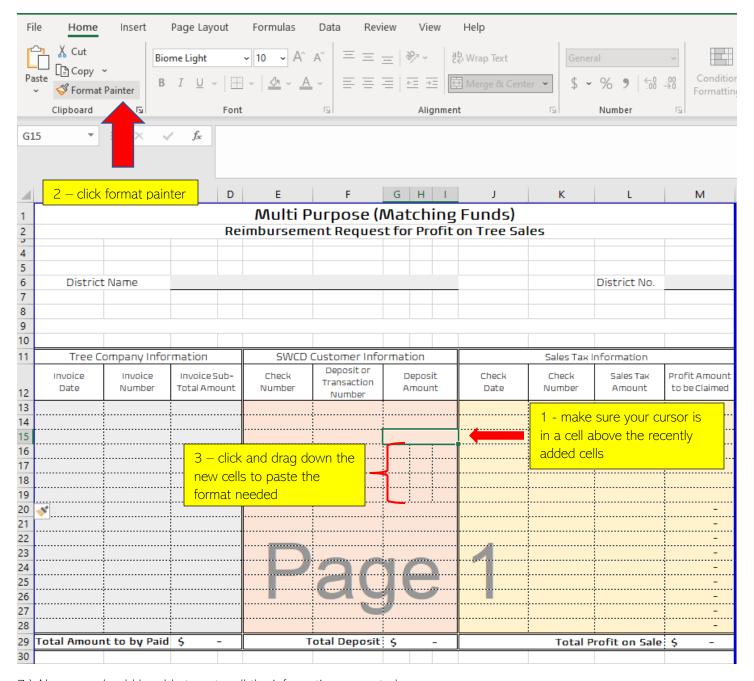
Regarding the Deposit slip or Transaction Number, please use the transaction ID number from the bank's receipt as reference. Please see an example of what to look for.



6.) if you need additional lines, please make sure you also change the cell's format (if needed) as follow:



А	В	С	D	Е	F	G	Н	-1	J	К	L	М
Multi Purpose (Matching Funds)												
			Re	imburseme	ent Reques	t fo	г Ргс	ofit	on Tree Sa	les		
Dieteia	t Name										District No.	
DISTITU	.c ivallie										DISTITUTIO.	
Tree (Lompany Info	rmation		SWCD	L Customer Info	rmat	ion			Sales Tax	Information	
Invoice	Invoice	InvoiceSu	Sub- Check Deposit or Deposit		t	Check	Check	Sales Tax	Profit Amount			
Date	Number	Total Amo	unt	Number	Transaction Number	Д	moun	t	Date	Number	Amount	to be Claimed
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					/					the new row ormat needs		
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Total Amount to by Paid \$ -				Total Deposit \$ -				Total Profit on Sale \$ -				
Please note -	There must be	an invoice, a c	heck	and a deposit nu	l imber to corresp	ond w	ith ea	ch ent	try.			
hereby certi	fy that this red	quest for Sta	ate N	Natching Funds	s Worksheet is	comp	lete a	nd ac	curate to the	best of my kno	owledge.	



- 7.) Now, you should be able to enter all the information requested.
- 8.) If you have multiple entries for <u>TSP</u>, <u>Seed Sales</u>, <u>Tree Sales</u>, <u>Drip Supplies</u>, <u>and Book Sales</u> you MUST follow these steps, otherwise, your total amounts/profit amount will not be accurate since the column containing special formulas will not be copied:

Multi Purpose (Matching Funds) Reimbursement Request for TSP Grants									
		trict Nam		1			_		
	DIS				D	istrict No.			
		TS	P Grants I	nformation					
Direct Deposit Date	Direct Deposit No.		TPS Month Paid			Amount paid by TSSWCB		Amount lowed to by Claimed	
		August			\$	500.00		375.00	
			Septemb		\$	350.00		262.50	
			Octobe		s s	675.00		506.25	
Fill out a	ıll cells		November			230.00		172.50	
available	e, then print		December			510.00		382.50	
the page		January			\$	487.00		365.25	
	<u></u>		Februa		\$	259.00		194.25	
			March	1	\$	179.00		134.25	
			April		\$	564.00		423.00	
			May		\$	254.00		190.50	
			June		\$	364.00		273.00	
			July		\$	784.00	_	588.00	
	\$	3,867.00							
Please note - There must be a direct deposit or transaction number to correspond with each entry.									
r reade note	mere masc be e	an ecc dept	Jane Or Credita	accionnamber to	COIT	espond wit	eac	rrenery.	

Multi Purpose (Matching Funds) Reimbursement Request for TSP Grants									
	Dis	trict Name				District No.			
Direct Deposit Date	Direct Deposit No.	TSP Grants Information TPS Month Paid			mount paid yTSSWCB	Amount Allowed to by Claimed			
Enter total amount fro page printe		From Page 1 August			5,156.00 450.00	3,867.00 337.50 -			
	Fill ou	t ning data				- - - -			
		Pa	age	1		- - - -			
			Tot	tal Amou	nt Claimed	\$ 4,204.50			

- 9.) if you need more pages, you need repeat these steps for each additional page printed
- 10.) Please make sure you give a detailed explanation of the funds claimed if you are using the "OTHER" category.
- 11.) As a result, you could turn in a maximum of 15 pages in total (given the case that you would be claiming funds from each category).