







# **SAN DIEGO)** Commission for Arts and Culture



**FY19** 

# How to Complete a Request for Payment Form

#### For Nonprofit Organizations Awarded Arts and Culture Funding

These instructions are for each nonprofit organization (contractor) that has received a fully executed signed contract and a purchase order number related to funding from The City of San Diego Commission for Arts and Culture's Organizational Support Program (OSP) or Creative Communities San Diego (CCSD).

#### **QUICK START SUMMARY:**

- 1. Read these instructions and review your organization's contract.
- 2. Compile the necessary information regarding expenses and matching income sources.
- 3. Verify that all expenses are approved for reimbursement.
- 4. Complete the request for payment form (invoice) and print it on your organization's letterhead.
- 5. If applicable, supply any required documentation for expenses.
- 6. Using the date it is submitted, sign and date the invoice. Submit it to Commission staff.
- 7. If you have read and followed the detailed instructions but want more information, contact Leticia Gomez-Franco, Civic Art Project Manager, at GomezL@sandiego.gov.

Need a template of the request for payment? Find it here: www.sandiego.gov/arts-culture/funding

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#### **DETAILED INSTRUCTIONS:**

#### When can a request for payment be submitted?

A contractor must possess two things before requesting reimbursement from the City:

- 1. A contract, signed by all the necessary parties and recorded by the City Clerk; and
- 2. A purchase order number issued by the City. The purchase order number will be sent to your organization via email.

### What expenses are eligible for reimbursement?

All expenses need to incur between July 1, 2018, and June 30, 2019. Aside from ineligible expenses, contractors can submit for reimbursement in any area. Staff recommends using fewer line items to make it easier to complete:

Artists & Performers - Salaries & Fringe
All Other Employees - Salaries & Fringe
Advertising & Marketing
Artists & Performers - Non Salaried
Production & Exhibition Costs
Rent
All Other Operating Expenses

### What expenses are ineligible for reimbursement?

Categories of ineligible expenses include capital or equipment expenditures, purchases of awards, trophies, gifts, uniforms, alcohol, or the buildup of reserves. For full details, refer to Council Policy 100-03: <a href="http://docs.sandiego.gov/councilpolicies/cpd">http://docs.sandiego.gov/councilpolicies/cpd</a> 100-03.pdf.

## How many invoices can be submitted? And how often?

Contractors can submit invoices between July 1, 2018, and August 31, 2019. Invoices submitted after August 31, 2019, are not guaranteed payment.

OSP Invoicing:
☐ Minimum: 1 & Maximum: 4
CCSD Invoicing:
☐ Minimum: 1 & Maximum: 2
$\square$ No more than ninety (90) calendar days after the conclusion of the project or the
date of contract execution.

# What information about expenses is needed? On the expense table record the following for each expense: ☐ Description of the expense ☐ Amount of the expense ☐ Vendor or Employee name □ Date of payment ☐ Payment type: check, credit card or direct deposit o If paid for with a check, include the check number under payment type. What additional documentation of expenses is required? □ Expenses Paid for by Check o Organizations are <u>not</u> required to submit copies of invoices or canceled checks. You must keep invoices and proofs of payment on file until the City conducts an audit of your organization's contract files or until a period of three years has elapsed, whichever occurs first. □ Expenses Paid for with Credit Card o Copies of the itemized receipts. o A copy of the credit card statement with the expenses highlighted. o The City is unable to reimburse these purchases without full itemization. ☐ Expenses Using Direct Deposit (Payroll Expenses Only) o A copy of the statement from the payroll company with the expenses highlighted. What are the match income requirements? As stipulated by Council Policy 100-03, all contractors are required to match their contract award. The organization's required match amount is stated in the contract. All matching

As stipulated by Council Policy 100-03, all contractors are required to match their contract award. The organization's required match amount is stated in the contract. All matching income needs to be received during the period of the contract; for FY19 this is from July 1, 2018 - June 30, 2019.

#### Matching funds can come from:

Contributed Income, such as but not limited to donations from individuals,
foundations, corporations, or other government entities.
Earned Revenue, such as but not limited to ticket sales, gift shop income, or
program fees.

Match	ing funds <u>can not</u> come from:
	Funds received from The City of San Diego.
Progra	nm Matching Requirements:
OSP:	
	All contracts require a 3:1 cash match.
CCSD:	
	Project cash expenses > \$30,000, requires a 3:1 cash match.  Project cash expenses < \$30,000, requires a 2:1 match, and up to 50% of the match may come from in-kind donations.
<u>What</u>	information about match income is needed?
On the	match income table record the following for each income source:
	Description of income source
	Amount of funds from the source
	Date the funds were received
	Match income total for this request
	Match income from previous requests, if applicable
	Total match income demonstrated to date

## What if my organization is requesting augmentation funds?

Please reference the augmentation funds packet provided by Commission staff for information.

## **How do I submit a complete and accurate request for payment?**

Via email to: Leticia Gomez Franco, GomezL@sandiego.gov

Via Mail to:

Commission for Arts and Culture Attn: Leticia Gomez Franco 1200 Third Avenue, Suite 924 San Diego, CA 92101

### How long does it take to receive payment once an invoice is submitted?

Contractors can expect payment 30 days from the invoice date.

# [Insert Letterhead/Organization's Logo]

# **Request for Payment (Invoice) Template**

Contractor's Legal Name:	
Address:	
Phone Number:	
Contract Number:	
Purchase Order Number:	
Invoice Date:	
Contractor Invoice Number:	
Employer Identification Number (EIN#):	
Total Request Amount:	\$
What number request is this (#1-4)?	

## **TABLE 1: LIST OF ITEMIZED EXPENSES**

<sup>\*</sup>If you need more lines, please attach a spreadsheet with additional data.\*

Description of Expense	Amount of the Expense	Vendor or Employee Name	Date of Payment	Payment Type (Check #, Credit Card or Direct Deposit)
	\$			
	\$			
	\$			
	\$			
	\$			
Total Expenses:	\$			

### **TABLE 2: MATCH INCOME TABLE**

\*If you need more lines, please attach a spreadsheet with additional data.\*

Description of Match Income Source	Amount	Date Received
	\$	
	\$	
	\$	
	\$	
Subtotal for this request:	\$	
A. Total Match Required:	\$	
B. 1 <sup>st</sup> Request Match Income Total:	\$	
B. 2 <sup>nd</sup> Request Match Income Total:	\$	
B. 3 <sup>rd</sup> Request Match Income Total:	\$	
B. 4 <sup>th</sup> Request Match Income Total:	\$	
C. Total Match Amount to Date:	\$	← Sum of all B Lines
D. Remaining Match Amount:	\$	← Subtract Line C from Line A.

### **Authorization**

I have prepared this invoice in compliance with Article III of the Agreement between The City of San Diego and the organization I represent.

Printed Name & Title	
Signature	
Date	