

**SUMMIT COUNTY PUBLIC HEALTH
SUBRECIPIENT EXPENDITURE REPORT CHECKLIST**

GRANT: _____

MONTH / YEAR: _____

AGENCY NAME: _____

SALARIES / FRINGE

- Payroll reflect correct period (check payroll submitted in previous billing)
- Time cards/time and effort sheets, pay stubs, and payroll reports indicate same dates and hours worked
- Time cards or time and effort sheets are included for every employee and are **signed by both employee and supervisor**
- Gross salary and itemized employer fringes claimed are included in documentation
- Salaries do not include any contracted employee work (must be submitted under "Contracts")

OTHER DIRECT COSTS

- All purchases are approved in budget
- All items claimed have invoices and/or receipts billed to their approved budget category
- Mileage logs are included for travel, that include: routes and reimbursement rate per mile

CONTRACTS

- Contractor invoices indicate: hours worked, rate of pay, and amount billed

EXPENDITURE SHEET / DOCUMENTATION

- Budget and budget categories are the correct amount
- All current, year to date, and remaining balance columns are correct (check prior report)
- Report format and text has not been altered
- Responsible party has signed the expenditure sheet