

WISE-Grants

Wisconsin State Patrol
Bureau of Transportation Safety
WISE – Grants Training
Summer 2013



Governors Conference 2013



www.wigrants.gov

Presented by:

Larry Corsi

Jill Benkert

Tina Bon Durant

Katie Mueller

Tondra Davis

Bureau of Transportation Safety

Logging Into WISE-Grants

Where to find WISE-grants?

<http://www.wigrants.gov>

- Enter your username (usually first initial of your first name and your full last name)
- Enter your password
- Click Login

Your username and password can be changed or reset. By contacting Michele Lind at michelelind@dot.wi.gov or Tina BonDurant at tina.bondurant@dot.wi.gov

WISE-Grants
Wisconsin Safety and Enforcement Grants

IntelliGrants Home

WISCONSIN DEPARTMENT OF TRANSPORTATION
ZERO IN WISCONSIN

Welcome to Wise-Grants...

Welcome to the Bureau of Transportation Safety (BOTS) grants management system, better known as WISE-Grants.

If you are new to WISE-Grants , please register today and a BOTS representative will review your registration within 2 business days. If approved, you will receive a confirmation email.

To view the gaining access manual, please [click here!](#)

Should you have any additional questions about WISE-Grants, please contact Vicki Schwabe:
Phone: (608)266-0402
Email (Preferred): vicki.schwabe@dot.wi.gov

[Click Here](#) to find a Regional Program Manager in your area!
[Click Here](#) to find a Law Enforcement Liaison in your area!

We look forward to working with you to improve safety on Wisconsin's highways.

Safe travels,
BOTS Staff

Click on the logos below to navigate to related sites for Wisconsin Highway Safety.

WISCONSIN

WISE-Grants

Wisconsin Safety and Enforcement Grants

[My Home](#) [My Proposals](#) [My Activity Reports](#) [My Unfunded Reimbursements](#)



My Home Page

What is on it?

[SHOW HELP](#)



Welcome Tina

Administrative Staff

[Change My Picture](#)

Instructions:

Select the **SHOW HELP** button above for detailed instructions on the following.

- > Applying for an Opportunity
- > Using System Messages
- > Understanding your Tasks
- > Managing your awarded grant

**An Opportunity is
an unfunded
agency
deployment
activity report!**

Hello Tina, please choose an option below.

View Available Opportunities

You have **3** My Opportunities available.

Select the **View Opportunities** button below to see what is available to your organization.

[VIEW OPPORTUNITIES](#)

My Inbox

You have **0** new messages.

Select the **Open My Inbox** button below to open your system message inbox.

[OPEN MY INBOX](#)

My Tasks

You have **1033** new tasks.

You have **302** tasks that are critical.

Select the **Open My Tasks** button below to view your active tasks.

[OPEN MY TASKS](#)



[Back](#)

My Opportunities

To apply for an item listed below, select the **Apply Now** button below each description.

Provider:

Document Instance:

Due Date (From - To):

 -

FILTER

Unfunded Alcohol Crackdown Activity Report 2013 †

Offered By:
bots

Activity Report Availability Dates:
10/01/2012-09/30/2013

Activity Report Period:
10/01/2012-09/30/2013

Activity Report Due Date:
09/30/2013

Description:
Highly visible alcohol enforcement.

APPLY NOW

December 7 – 16, 2013
(Booze and Belts)
May 19 – June 1, 2014
(CIOT National Mobilization)
Aug 15 – Sept 1, 2014
(Alcohol Crackdown)

Funded Agency will include National Mobilization Numbers with their monthly activity reports.



Welcome Tina

Administrative Staff

[Change My Picture](#)

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Hello Tina, please choose an option below.

View Available Opportunities

You have **3** My Opportunities available.

Select the **View Opportunities** button below to see what is available to your organization.

[VIEW OPPORTUNITIES](#)

My Inbox

You have **0** new messages.

Select the **Open My Inbox** button below to open your system message inbox.

[OPEN MY INBOX](#)

The Inbox is
Connected to the WISE
System – not your e-mail
system

My Tasks

You have **1033** new tasks.

You have **302** tasks that are critical.

Select the **Open My Tasks** button below to view your active tasks.

[OPEN MY TASKS](#)

- Read all messages carefully

- Most of your messages will be system messages, which are messages about your grant or activity report

- You can find all your previously read “archived” messages by clicking - View All My System Messages

My Reports | My Administration | My Training Materials | My Organization(s) | My Profile | Logout

SHOW HELP



Welcome Andrea
Regional Program Manager (RPM)
[Change My Picture](#)

Instructions:
Select the **SHOW HELP** button above for detailed instructions on the following.

- > Applying for an Opportunity
- > Using System Messages
- > Understanding your Tasks
- > Managing your awarded grant

Hello Andrea, please choose an option below.

 **My Inbox**

Sort my inbox messages by: -- Select -- GO | [View All My System Messages](#)

<input type="checkbox"/>	Priority	Sender	Subject	
<input type="checkbox"/>		System, Grant	Activity Report Submission	2 PM
<input type="checkbox"/>		System, Grant	Activity Report Submission	0 PM
<input type="checkbox"/>		System, Grant	Activity Report Submission	7:24:09 PM
<input type="checkbox"/>		System, Grant	Activity Report Submission	8/27/2011 8:34:37 AM
<input type="checkbox"/>		Way, Mrs. B		
<input type="checkbox"/>		System, Grant	Activity Report Submission	

Archived Messages

**Grant System = “Canned Message”
Read Carefully**

Mark box of those messages you want archived
And then “Mark Checked as Read”

CLOSE MY INBOX **MARK CHECKED AS READ**

WISE-Grants

Wisconsin Safety and Enforcement Grants



[My Home](#) [My Proposals](#) [My Activity Reports](#) [My Unfunded Reimbursements](#)

Where do I find my
Grants?!!

WISE-Grants

Wisconsin Safety and Enforcement Grants



[My Home](#) [My Proposals](#) [My Activity Reports](#) [My Unfunded Reimbursements](#)

[My Reports](#) | [My Administration](#) | [My Training Materials](#) | [My Organization\(s\)](#) | [My Profile](#) | [Logout](#)

[SHOW HELP](#)



Welcome Andrea

Regional Program Manager (RPM)

[Change My Picture](#)

Instructions:

Select the **SHOW HELP** button above for detailed instructions on the following.

- > Applying for an Opportunity
- > Using System Messages
- > Understanding your Tasks
- > Managing your awarded grant

Hello Andrea, please choose an option below.



My Inbox

You have **423** new messages.

Select the **Open My Inbox** button below to open your system message inbox.

[OPEN MY INBOX](#)



My Tasks

You have **205** new tasks.

You have **23** tasks that are critical.

Select the **Open My Tasks** button below to view your active tasks.

[OPEN MY TASKS](#)

From your My Home Page
-Click on My Proposals

[Back](#)

My Proposals

Use the search functionality below to find a specific Proposals.

Search Proposals

Proposals Types

Proposals Name

Person

Status

Organization

Year

[Top of the Page](#)

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This is the simplest of all searches.

- Enter the Grant Year
- Click Search

This will list all the grants your organization has for that grant year.

[Back](#)

My Proposals

Use the search functionality below to find a specific Proposals.

Search Proposals

Proposals Types

Proposals Name

Person

Status

Year

Export Results to **Sort by:**

Number of Results **54**

Funded Grants	BOTS	FG-2013-BOTS-01870	Grant Active	2013	
Funded Grants	BOTS	FG-2013-BOTS-01871	Grant Active	2013	
Funded Grants	BOTS	FG-2013-BOTS-01875	Grant Active	2013	
Funded Grants	BOTS	FG-2013-BOTS-01876	Grant Active	2013	
Funded Grants	BOTS	FG-2013-BOTS-01890	Grant Active	2013	
Funded Grants	BOTS	FG-2013-BOTS-01891	Grant Application In Process	2013	
Funded Grants	BOTS	FG-2013-BOTS-01892	Grant Application In Process	2013	
Funded Grants	BOTS	FG-2013-BOTS-01893	Grant Application In Process	2013	
Funded Grants	BOTS	FG-2013-BOTS-01895	Grant Active	2013	

If you see a grant with the words **IN PROCESS**...you need to do something. The grant has not been submitted.

[Back](#)

My Proposals

Use the search functionality below to find a specific Proposals.

Search Proposals

Proposals Types

Proposals Name

Person

Status

Organization

Year

[SEARCH](#)

[CLEAR](#)

For a more specific search

- Enter the Grant Number
- Enter the Grant Year
- Click Search

[Top of the Page](#)

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My Proposals

Use the search functionality below to find a specific Proposals.

Search Proposals

Proposals Types

Proposals Name

Person

Status

Organization

Year

SEARCH

CLEAR

Export Results to

Sort by:

GO

Number of Results **1**

Document Type	Organization	Name	Current Status	Year
Funded Grants	BOTS	FG-2013-BOTS-01899	Grant Active	2013

To open your Grant
- Click on the Name Link

COMPLETING A GRANT APPLICATION

- Search for grant application you wish to complete.

-Go to MY PROPOSALS

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Wisconsin Safety and Entertainment Grants

My Home | **My Proposals** | My Activity Reports | My Unfunded Reimbursements | My Grant Types

My Reports | My Administration | My Training Materials | My Organization(s) | My Profile | Logout

[SHOW HELP](#)

 **Welcome Jill**
State Program Managers (SPM)
[Change My Picture](#)

Instructions:
Select the **SHOW HELP** button above for detailed instructions on the following.
> Applying for an Opportunity
> Using System Messages
> Understanding your Tasks
> Managing your awarded grant

Hello Jill, please choose an option below.

 **View Available Opportunities**
You have **2** My Opportunities available.
Select the **View Opportunities** button below to see what is available to your organization.

[VIEW OPPORTUNITIES](#)

 **My Inbox**
You have **1** new messages.
Select the **Open My Inbox** button below to open your system message inbox.

[OPEN MY INBOX](#)

 **My Tasks**
You have **651** new tasks.
You have **230** tasks that are critical.
Select the **Open My Tasks** button below to view your active tasks.

[OPEN MY TASKS](#)

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-Type in the grant number for the application you wish to complete in the field PROPOSAL NAME

-Click SEARCH.

The screenshot displays the WISE-Grants website interface. At the top, the header includes the logo for WISE-Grants (Wisconsin Safety and Enforcement Grants) and the 7EDD logo. Navigation links include My Home, My Proposals, My Activity Reports, My Unfunded Reimbursements, and My Grant Types. A secondary navigation bar contains links for My Reports, My Administration, My Training Materials, My Organization(s), My Profile, and Logout, along with a SHOW HELP button.

The main content area is titled "My Proposals" and includes a "Back" link. Below this is a search section titled "Search Proposals" with the instruction: "Use the search functionality below to find a specific Proposals." The search form includes a "Proposals Types" dropdown menu set to "Funded Grants 2013". The "Proposals Name" input field is highlighted with a red rectangle. Other fields include "Person", "Status" (a dropdown menu set to "-- Select --"), and "Organization". The "SEARCH" button is also highlighted with a red rectangle, and a "CLEAR" button is located next to it.

At the bottom of the page, there is a "Top of the Page" link, a footer note "Powered by IntelliGrants™", and a copyright notice "© Copyright 2000-2013 Agate Software, Inc."

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My Proposals

Use the search functionality below to find a specific Proposal.

Search Proposals

Proposals Type:

Proposals Name:

Person:

Status:

Organization:

Year:

[SEARCH](#) [CLEAR](#)

Export Results to: Sort by: [GO](#)

Number of Results: 1

Document Type	Organization	Name	Current Status	Year
Funded Grants	WSP HEADQUARTERS	FC-2013-WSP-HEAD-01640	Grant Active	2013

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Select the grant listed under the 'Name' category.

You are now in the Grants Menu.

-To find the screens that require completion, select VIEW FORMS.

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Wisconsin Safety and Enforcement Grants

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SHOW HELP

Back

Funded Grants Menu

Document Information: [FG-2013-WSP HEAD-01640](#)

Details

Info	Document Type	Organization	Role	Current Status	Period Date / Date Due
	Funded Grants	WSP HEADQUARTERS	State Program Managers (SPM)	Grant Active	10/01/2012 - 09/30/2013 06/22/2013 11:59PM EST

View, Edit and Complete Forms
Select the **View Forms** button below to view, edit, and complete forms.

VIEW FORMS

Change the Status
Select the **View Status Options** button below to perform actions such as submitting applications or request modifications.

VIEW STATUS OPTIONS

Access Management Tools
Select the **View Management Tools** button below to perform actions such as adding people to this document or viewing the document history.

VIEW MANAGEMENT TOOLS

Examine Related Items
Select the **View Related Items** button below to view related items such as claims, messages, etc.

VIEW RELATED ITEMS

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The screen links in the **red** box require an action.

The screen link in the **green** box is for additional grant information or documentation.

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Funded Grants Menu - Forms

Please complete all required forms below. [SHOW HELP](#)

Document Information: [FG-2013-WSP HEAD-01640](#)
[Details](#)

Forms

Status	Page Name	Note	Created By	Last Modified By
	Grant Type		Mr. Larry Corsi SPM 9/24/2012 10:31:16 AM	
	EAPS Import Page		Grant System 1/16/2013 12:37:14 PM	
Alcohol Enforcement				
	General Information		Mr. David Harvey 9/27/2012 1:08:52 PM	
	Problem Identification/Project Justification		Mr. David Harvey 9/27/2012 1:10:20 PM	
	Project Objectives with Evaluation Plan		Mr. David Harvey 9/27/2012 1:18:28 PM	
	Policy Requirements		Mr. David Harvey 9/27/2012 1:19:00 PM	
	Work Plan		Mr. David Harvey 9/27/2012 1:23:49 PM	Mr. David Harvey 10/10/2012 11:29:59 AM
	Budget And Equipment Request		Mr. David Harvey 9/27/2012 1:25:13 PM	Mr. David Harvey 10/10/2012 11:32:17 AM
	Deliverables		Mr. David Harvey 9/27/2012 1:26:29 PM	
Contract Terms & Conditions				
	General Contract Terms Alcohol Enforcement		Mr. David Harvey 10/10/2012 11:33:26 AM	
	Printable Signature Page Alcohol Enforcement			
Administrative Section - WIBOTS STAFF ONLY				
	Administrative Information		Mr. Larry Corsi SPM 10/1/2012 3:58:44 PM	Ms. Vicki Schwabe 10/31/2012 12:20:47 PM
Full PDF Version				
	Create Full Print Version			
Executed Agreement				
	Executed Agreement			
Supporting Documentation				
	Supporting Documentation		Mr. Larry Corsi SPM 10/31/2012 4:04:13 PM	
Amendments				
	Amendment Justification			

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GENERAL INFORMATION

-Complete all fields marked with a red asterisk.

-When complete, click SAVE.

-The next screen to be completed can be accessed by clicking the FORMS MENU link near the top of the page.

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Wisconsin Safety and Enforcement Grants

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SAVE PRINT VERSION ADD NOTE CHECK GLOBAL ERRORS

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Document Information: [EG-2013-WSP HEAD-01640](#)
[Details](#)

You are here: > [Funded Grants Menu](#) > **Forms Menu** > Alcohol Enforcement

GENERAL INFORMATION

Instructions:
Please complete this page, then click the **Save** button.
Required fields are marked with an *.

Proposed Project Title: ALCOHOL ENFORCEMENT 2013
Type of Municipality: Other *
Applicant Agency/County: Milwaukee County *

Enforcement Area: *
Agency Federal Employer ID (FEIN): *
DUNS Number: *

Agency Head or Authorizing Official
First Name: *
Last Name: *
Title: *
Address: *
City: *
State: *
Zip Code: *

Project Coordinator
First Name: *
Last Name: *
Title: *
Address: *
City: *
State: *
Zip Code: *
Phone: *
Fax: *
E-mail Address: *

Navigation Links

Status	Page Name	Note	Created By	Last Modified By
	General Information		Harvey, Mr. David	9/27/2012 1:08:52 PM
	Problem Identification/Project Justification		Harvey, Mr. David	9/27/2012 1:10:20 PM
			Harvey, Mr. David	

PROJECT IDENTIFICATION/PROJECT JUSTIFICATION

-Complete all fields marked with a red asterisk, including the “I agree” box on bottom.

-When complete, click SAVE.

-The next screen to be completed can be accessed by clicking the FORMS MENU link near the top of the page

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You are here: > [Funded Grants Menu](#) > [Forms Menu](#) Alcohol Enforcement

PROBLEM IDENTIFICATION/PROJECT JUSTIFICATION

Instructions:
Please complete this page, then click the **Save** button.
Required fields are marked with an *.

SAVE **PRINT VERSION** **ADD NOTE** **CHECK GLOBAL ERRORS**

Alcohol-impaired Driving: In Wisconsin during 2011 alcohol was listed as a contributing factor in 4.7% of all crashes. 32.6% of all vehicle crash fatalities in 2011 were alcohol-related, resulting in 183 deaths. Alcohol-impaired driving is associated with other high-risk behaviors that increase the likelihood of a crash and of significant injury or death occurring; these include speeding, and failure to wear safety belts.

Enforcement Area (Targeting): WisDOT analysis has identified roadway segments patrolled by this agency as "at-risk". All alcohol and speed-related crash data from the three previous years for every jurisdiction in Wisconsin were analyzed, including those involving property damage through all ranges of injuries to those that resulted in death. These data were scientifically weighted, following established statistical protocol. Using the weighted data, the Bureau identified those places in Wisconsin with the largest crash frequency due to excess alcohol use or speed. After factoring in each identified, at-risk location's population density, a snapshot of the state's most likely places for similar crashes per capita was established.
Source: BOTS Analysis

For Alcohol Enforcement Grantees, OT Enforcement reimbursed with NHTSA Grant Funds must take place between the hours of 6:00P and 4:30A (2011 data is preliminary).

Additional Justification

I agree to the terms and conditions above.*

Navigation Links

Status	Page Name	Note	Created By	Last Modified By
	General Information		Harvey, Mr. David 9/27/2012 1:08:52 PM	
	Problem Identification/Project Justification		Harvey, Mr. David 9/27/2012 1:10:20 PM	
	Project Objectives with Evaluation Plan		Harvey, Mr. David 9/27/2012 1:18:28 PM	
	Policy Requirements		Harvey, Mr. David 9/27/2012 1:19:00 PM	
	Work Plan		Harvey, Mr. David 9/27/2012 1:23:49 PM	Harvey, Mr. David 10/10/2012 11:29:59 AM
	Budget And Equipment Request		Harvey, Mr. David 9/27/2012 1:25:13 PM	Harvey, Mr. David 10/10/2012 11:32:17 AM
	Deliverables		Harvey, Mr. David 9/27/2012 1:26:29 PM	

82342
[Top of the Page](#)

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PROJECT OBJECTIVES WITH EVALUATION PLAN

-Complete all fields marked with a red asterisk, including the "I agree" box on bottom.

-When complete, click SAVE.

-The next screen to be completed can be accessed by clicking the FORMS MENU link near the top of the page

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SAVE PRINT VERSION ADD NOTE CHECK GLOBAL ERRORS

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[Details](#)

You are here: > [Funded Grants Menu](#) > [Forms Menu](#) Alcohol Enforcement

PROJECT OBJECTIVES WITH EVALUATION PLAN

Instructions:
Please complete this page, then click the **Save** button.
Required fields are marked with an *.

- To adopt a zero tolerance policy for impaired driving during all motor vehicle stops.
Evaluation: Activity Report - Citations
- To adopt a zero tolerance policy for unrestrained occupants during all motor vehicle stops.
Evaluation: Activity Report - Citations
- During past deployments, Grantees have typically initiated a recorded traffic stop about every 45 minutes. To maintain or exceed historical activity levels during grant-funded activity Grantee will, on average, initiate a recorded traffic stop every Minutes.
Evaluation: Activity Report - Contacts*
- During past grant-funded deployments, Grantees typically maintain an agency ratio of three citations to one written warning.
Evaluation: Activity Report - Citations/Warnings
- To make contacts with local media, community groups or other groups to increase public awareness of information related to seatbelt related crashes, and subsequent enforcement efforts a minimum of once during every quarter of grant approval. Creating partnerships with community groups, public and private, to enforce public awareness of this campaign is strongly encouraged.

An Agency's failure to meet project Objectives may affect their consideration for future grant awards.

Objectives/Evaluation

I agree to the terms and conditions above.*

Navigation Links

Status	Page Name	Note	Created By	Last Modified By
	General Information		Harvey, Mr. David 9/27/2012 1:08:52 PM	
	Problem Identification/Project Justification		Harvey, Mr. David 9/27/2012 1:10:20 PM	
	Protect Objectives with Evaluation Plan		Harvey, Mr. David 9/27/2012 1:18:28 PM	
	Policy Requirements		Harvey, Mr. David 9/27/2012 1:19:00 PM	
	Work Plan		Harvey, Mr. David 9/27/2012 1:23:49 PM	Harvey, Mr. David 10/10/2012 11:29:59 AM
	Budget And Equipment Request		Harvey, Mr. David 9/27/2012 1:25:13 PM	Harvey, Mr. David 10/10/2012 11:32:17 AM
	Deliverables		Harvey, Mr. David 9/27/2012 1:26:29 PM	

POLICY REQUIREMENTS

-Complete all fields marked with a red asterisk, including the “I agree” box on bottom.

-When complete, click SAVE.

-The next screen to be completed can be accessed by clicking the FORMS MENU link near the top of the page

The screenshot shows a web form interface. At the top right, there is a yellow button labeled 'CHECK GLOBAL ERRORS'. Below it, on the right side, is a yellow button labeled 'SAVE' with a red border. On the left side, there is a 'Back' link with a circular arrow icon. Below that is 'Document Information: FG-2014-BOTS-01908' and a 'Details' link with a folder icon. Underneath is a breadcrumb trail: 'You are here: > Funded Grants Menu > Forms Menu', where 'Forms Menu' is highlighted with a red rounded rectangle. The main heading is 'POLICY REQUIREMENTS'. Below this is an 'Instructions:' section with the text: 'Please complete this page, then click the Save button. Required fields are marked with an *.' This is followed by a paragraph: 'All grantees agree to adhere to the following policies, which are detailed in the full contract.' Then, 'Grantee is :' is followed by a bulleted list of eight policy items. Below that, 'if the grant funds will be expended on law enforcement, grantee further certifies:' is followed by another bulleted list of four items. At the bottom, there is a checkbox labeled 'I agree to the terms and conditions above.*', which is also highlighted with a red rounded rectangle.

WORK PLAN (Top Half of Screen)

- This section of the WORK PLAN screen provides information on the work plan schedule and process

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WORK PLAN **SAVE** PRINT VERSION ADD NOTE CHECK GLOBAL ERRORS

Instructions:
Please complete this page, then click the **Save** button.
Required fields are marked with an *.

2013 Federal Grant Period:
Grant activities are funded for one federal fiscal year. Funded fiscal year 2013 activities may begin no earlier than **October 1, 2012** and end no later than **September 30, 2013**. Activity for this project can begin no earlier than the date the contract is signed by the BOTS Director, or his/her designee.

1. Work Plan /Calendar:
The Work Plan/Calendar contained within this contract is a term of the contract. It describes timing and level of enforcement activity. At a minimum, during the term of this contract:

A. Grantee will implement at least one deployment per month as planned in the Work Plan/Calendar. The Agencies must participate in Highly Visible Enforcement (HVE) saturation patrols during the timeframes listed below, at high-risk locations, supported by publicity.

- December 7th – 16th, 2012 (Booze and Belts)
- March 4th – 20th, 2013 (St Patrick's Day)
- May 20th – June 2nd, 2013 (CIOT National Mobilization – minimum of 4 deployments)
- July 1st – 17th 2013 (Summer Heat)
- Aug 16th – Sept 2nd, 2013 (Alcohol Crackdown – minimum of 4 deployments)

(HVE is defined as 3 or more squads deployed simultaneously in targeted area, supported by media)

This can be a collaborative effort in combination with another LEA.

NOTE:
During CIOT, Grantees will schedule a minimum of 50% of the hours of enforcement at night during each of the four (4) mandatory deployments, with a minimum of 4-hour shifts.

NHTSA Grant Funds dictate that during overtime Alcohol Enforcement, Grantees must perform enforcement during the hours of 6:00pm and 4:30am.

If grantee cannot perform the planned patrols, BOTS must be notified. Failure to perform planned activity may be considered grounds for terminating the grant.

2. Work Plan Amendments:
If Work Plan must be changed after the contract is signed, Grantee must submit an Amendment request via the WISE-Grants System, and receive approval before the changed activity occurs. Failure to perform planned activity can be considered grounds for terminating the grant. **Work Plan Amendments will not be considered after July 1, 2013.**

WORK PLAN (Bottom half of screen)

-Complete all fields marked with a red asterisk, including the "I agree" box on bottom.

-When complete, click SAVE.

-The next screen to be completed can be accessed by clicking the FORMS MENU link near the top of the page

WORK PLAN/CALENDAR

Please enter data for all the required HVE saturation patrols listed under table A. You should not enter 0 in any required field within the Work Plan/Calendar. If you enter a value for any non required box, the remainder of the row should be completed. If you enter a zero for any column the calculation in column D will produce a 0 for that row. Only requested reimbursed hours should be included in work plan calendar.

Month	Enforcement Type	(A) Deployments	(B) Hours per Deployment	(C) Officers per Deployment	(D) Total Officer Hours (AxB)xC = D
October	Saturation/HVE	4 *	4 *	1 *	16
November	Saturation/HVE	8 *	4 *	1 *	32
December	Booze & Belts HVE	20 *	4 *	1 *	80
	OTHER	0	0	0	0
January	Saturation/HVE	15 *	4 *	1 *	60
February	Saturation/HVE	10 *	4 *	1 *	40
March	St. Patrick's HVE	12 *	4 *	1 *	48
	OTHER	0	0	0	0
April	Saturation/HVE	10 *	4 *	1 *	40
May	CIOT HVE	30 *	4 *	1 *	120
	OTHER	0	0	0	0
June	CIOT HVE	20 *	4 *	1 *	80
	OTHER	0	0	0	0
July	Summer Heat HVE	35 *	4 *	1 *	140
	OTHER	0	0	0	0
August	Alcohol Crackdown HVE	35 *	4 *	1 *	140
	OTHER	0	0	0	0
September	Alcohol Crackdown HVE	30 *	4 *	1 *	120

WORK PLAN ITEMS - Required:

- Saturation Patrols and Sustained Enforcement Deployments:** Grantee will assign only sworn, SFST-trained officers in patrols. Part-time officers may be assigned only if the grant funded. Total hours do not exceed 39 hours.
- Total Hours:** Grantee agrees to implement 229 deployments for a total of 916 enforcement hours.
- OT Hours & Rate:** Grantee's estimate of funded overtime hours is based upon an estimated average hourly wage/fringe rate of .
- State / National Mobilization Activity/Crackdown Reports:** Grantee will complete the Mobilization Reports and submit them to the grantor. Do not exceed:
 - "Booze & Belts Mobilization Activity Report due by Jan 15, 2013.
 - "St Patrick's Day Mobilization Activity Report due by Mar 15, 2013.
 - "Click It or Ticket" Safety Belt Mobilization Activity Report due by June 15, 2013.
 - "Summer Heat" Mobilization Activity Report due by July 15, 2013.
 - Alcohol Crackdown Activity Report due by Sept 15, 2013.
- Additional Items:**

This is for SE Region Post to work in a collaborative, multi-jurisdictional, highly visible alcohol enforcement

I agree to the terms and conditions above.

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DELIVERABLES

-Complete all fields marked with a red asterisk, including the “I agree” box on bottom.

-When complete, click SAVE.

-The next screen to be completed can be accessed by clicking the FORMS MENU link near the top of the page

[CHECK GLOBAL ERRORS](#)

[SAVE](#)

[Back](#)

Document Information: [FG-2014-Iowa Cou-01919](#)

[Details](#)

You are here: > [Funded Grants Menu](#) > [Forms Menu](#)

DELIVERABLES

Instructions:
Please complete this page, then click the **Save** button.
Required fields are marked with an *.

Forms: Forms will only be accepted through the WISE-Grants. Questions about grant submissions should be referred to either the State Program Manager, or the Regional Program Manager.

Click [Here](#) to see the SPM map
Click [Here](#) to see the RPM map

1. **Project Match Report:**

Grantee will complete the Final Project Match Report form provided by Grantor AFTER all project activity is complete, but no later than **November 1st of the fiscal year during which the project is commenced.**

The Final Reimbursement Claim must be received no later than **November 1st of the fiscal year during which the project is commenced.**, any claims received after November 1st will not be reimbursed.

2. **Earned Media Event Documentation:**

Documentation (hard-copy, faxed and/or electronic copies of media materials) of one earned media event must be submitted to BOTS. An electronic link to a print article, news online or other format is acceptable documentation.

3. **Place of Delivery:**

All Electronic Project Deliverables shall be submitted via the WISE-Grants System

Signature Pages shall be e-mailed to DOTsafetygrants@dot.wi.us

Questions about the Traffic Safety Program or this project should be addressed to the State Program Manager or the Regional Program Manager.

Click [Here](#) to see the SPM map
Click [Here](#) to see the RPM map

Wisconsin State Patrol, BOTS
P.O. Box 7936
MADISON, WI 53707-7936
FAX: (608) 267-0441
PH: (608) 267-3154

TO SUBMIT THE GRANT APPLICATION:

Select VIEW STATUS OPTIONS

WISE-Grants
Wisconsin Safety and Enforcement Grants

My Home | My Proposals | My Activity Reports | My Unfunded Reimbursements | My Grant Types
My Reports | My Administration | My Training Materials | My Organization(s) | My Profile | Logout

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Funded Grants Menu

Document Information: [FG-2013-WSP HEAD-01640](#)

[Details](#)

Info	Document Type	Organization	Role	Current Status	Period Date / Date Due
	Funded Grants	WSP HEADQUARTERS	State Program Managers (SPM)	Grant Active	10/01/2012 - 09/30/2013 06/22/2013 11:59PM EST

[View, Edit and Complete Forms](#)
Select the **View Forms** button below to view, edit, and complete forms.
[VIEW FORMS](#)

[Change the Status](#)
Select the **View Status Options** button below to perform actions such as submitting applications or request modifications.
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Funded Grants Menu - Status Options

Select a button below to execute the appropriate status push.

Document Information: [FG-2013-BOTS-01891](#)

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Possible Statuses

GRANT APPLICATION SUBMITTED

[CLICK HERE TO SUBMIT!](#)

GRANT APPLICATION FORFEITED

Click the button below to forfeit this grant application.

[CLICK HERE TO FORFEIT!](#)

[Top of the Page](#)

To submit grant application **CLICK HERE TO SUBMIT**

The screenshot shows the WISE-Grants interface. At the top, there is a blue header with the text "WISE-Grants" and "Wisconsin Safety and Enforcement Grants". Below this are navigation tabs: "My Home", "My Proposals", "My Activity Reports", and "My Unfunded Reimbursements". On the right side of the header, there are logos for the Wisconsin Department of Transportation and "ZERO IN WISCONSIN". A secondary navigation bar contains links for "My Training Materials", "My Organization(s)", "My Profile", and "Logout". Below these are "PRINT" and "SHOW HELP" buttons.

The main content area is titled "Agreement" and includes the instruction: "Please make a selection below to continue." Below this, a question asks: "Are you sure you want to submit this grant application? If you would like to include notes about this status change, please supply them below." A large text input box is provided for notes, with a character count of "0 of 2000". At the bottom of the input box, there are two buttons: "I AGREE" (highlighted with a red box) and "I DO NOT AGREE".

At the bottom of the page, it says "Powered by IntelliGrants™" on the left and "© Copyright 2000-2013 Agate Software, Inc." on the right.

1. The text box above will appear. If you have any correspondence/notes that you would like to have attached, enter them here and click I AGREE.

If there are no notes, just click I AGREE.

2. The grant status should now say SUBMITTED

WISE-Grants

Wisconsin Safety and Enforcement Grants

[My Home](#)

[My Proposals](#)

[My Activity Reports](#)

[My Unfunded Reimbursements](#)



HOW TO VIEW THE STATUS HISTORY OF A GRANT

TO VIEW THE STATUS HISTORY:

FUNDED GRANTS MENU

ACCESS MANAGEMENT TOOLS

Select VIEW MANAGEMENT TOOLS

WISE-Grants
Wisconsin Safety and Enforcement Grants

My Home | My Proposals | My Activity Reports | My Unfunded Reimbursements | My Grant Types
My Reports | My Administration | My Training Materials | My Organization(s) | My Profile | Logout

[SHOW HELP](#)

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Funded Grants Menu

Document Information: [FG-2013-WSP HEAD-01640](#)

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Info	Document Type	Organization	Role	Current Status	Period Date / Date Due
	Funded Grants	WSP HEADQUARTERS	State Program Managers (SPM)	Grant Active	10/01/2012 - 09/30/2013 06/22/2013 11:59PM EST

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Select STATUS HISTORY

WISE-Grants
Wisconsin Safety and Enforcement Grants



[My Home](#) | [My Proposals](#) | [My Activity Reports](#) | [My Unfunded Reimbursements](#) | [My Grant Types](#)
[My Reports](#) | [My Administration](#) | [My Training Materials](#) | [My Organization\(s\)](#) | [My Profile](#) | [Logout](#)

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Funded Grants Menu - Management Tools

The menu below contains links to the tools that can be used to manage this document. See the description below each link for more detail.

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[Details](#)

Management Tools

 **[CREATE FULL PRINT VERSION](#)**
Select the link above to create a printable version of the document.

 **[ADD/EDIT PEOPLE](#)**
Select the link above to perform actions such as adding people, changing a security role, or altering people's active dates on this document.

 **[STATUS HISTORY](#)**
Select the link above to view the status history of this document.

 **[CHECK FOR ERRORS](#)**
Select the link above to check the entire document for errors.

 **[DATE MODIFICATION](#)**
Select the link above to change the dates associated with this document such as its due date.

 **[ACCOUNT TRANSACTIONS](#)**
Select the link above to perform financial transactions with in the system on this document.

 **[VIEW MODIFICATION HISTORY](#)**
Select the link above to view various modifications that people have made to specific pages in the document.

 **[ATTACHMENT REPOSITORY](#)**
Select the link above to view all attachments in this document.

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[Top of the Page](#)

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STATUS HISTORY screen allows you to view the status of the grant application and any notes.

Grant Application In Process	9/6/2012 3:02:04 PM	Knoop, Mr. Thomas	
Grant Application Submitted	10/10/2012 12:54:00 PM	Renkas, Mr. Paul	
Grant Supervisor Review	10/15/2012 11:51:43 AM	Benkert, Jill	
CFO Review	10/22/2012 3:43:00 PM	Davis, Tondra	
Project ID Assigned	10/29/2012 4:09:48 PM	Andreasson, Ms. Laura	402 funded
Director Review	10/31/2012 12:09:27 PM	Schwabe, Ms. Vicki	
Grant Application Approved	11/2/2012 1:07:13 PM	Romanski, Randy	
Award Letters Received	11/5/2012 9:21:31 AM	Schwabe, Ms. Vicki	
Grant Active	11/5/2012 10:25:21 AM	Schwabe, Ms. Vicki	
Amendment In Process	5/3/2013 9:06:37 AM	Renkas, Mr. Paul	We would like to purchas a APEX 6500 mobile radio and a Panasonic Toughbook MDC
Grant Active	5/19/2013 8:48:20 AM	Renkas, Mr. Paul	
Amendment In Process	5/19/2013 8:49:22 AM	Renkas, Mr. Paul	
Amendment Submitted	5/20/2013 12:13:32 PM	Renkas, Mr. Paul	Changed Equipment to Toughbook
Amendment Modifications in Process	5/20/2013 2:19:00 PM	Mueller, Katie	Need to complete Amendment Justification
Amendment Modifications Submitted	5/26/2013 10:35:43 AM	Renkas, Mr. Paul	
Amendment Submitted	5/26/2013 10:35:44 AM	Renkas, Mr. Paul	
Grant Active	5/28/2013 12:04:52 PM	BonDurant, Tina	Need to attach signature page
Amendment Submitted	5/28/2013 12:07:21 PM	BonDurant, Tina	
Amendment Grant Supervisor Review	5/28/2013 12:08:29 PM	Benkert, Jill	The amendment is to add eligible equipment to the contract. This does increase the grant award by \$3,370.
Amendment Submitted	5/31/2013 2:37:48 PM	Davis, Tondra	No 402 funds available to increase grant amount.
Amendment			

WISE-Grants

Wisconsin Safety and Enforcement Grants

[My Home](#)

[My Proposals](#)

[My Activity Reports](#)

[My Unfunded Reimbursements](#)



HOW TO VIEW ALL MONTHLY ACTIVITY REPORTS WITHIN THE GRANT

TO VIEW ALL ITEMS
RELATED TO THE
GRANT:

FUNDED GRANTS
MENU

EXAMINE RELATED
ITEMS

Select VIEW RELATED
ITEMS

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Funded Grants Menu

Document Information: [FG-2013-WSP HEAD-01640](#)
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Info	Document Type	Organization	Role	Current Status	Period Date / Date Due
	Funded Grants	WSP HEADQUARTERS	State Program Managers (SPM)	Grant Active	10/01/2012 - 09/30/2013 06/22/2013 11:59PM EST

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RELATED ITEMS screen allows you to view the status of each monthly report associated with the grant at one glance.

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My Home | My Proposals | My Activity Reports | My Unfunded Reimbursements | My Grant Types
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Funded Grants Menu - Related Items

The various sections below can link to items that are associated with this document.

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[Details](#)

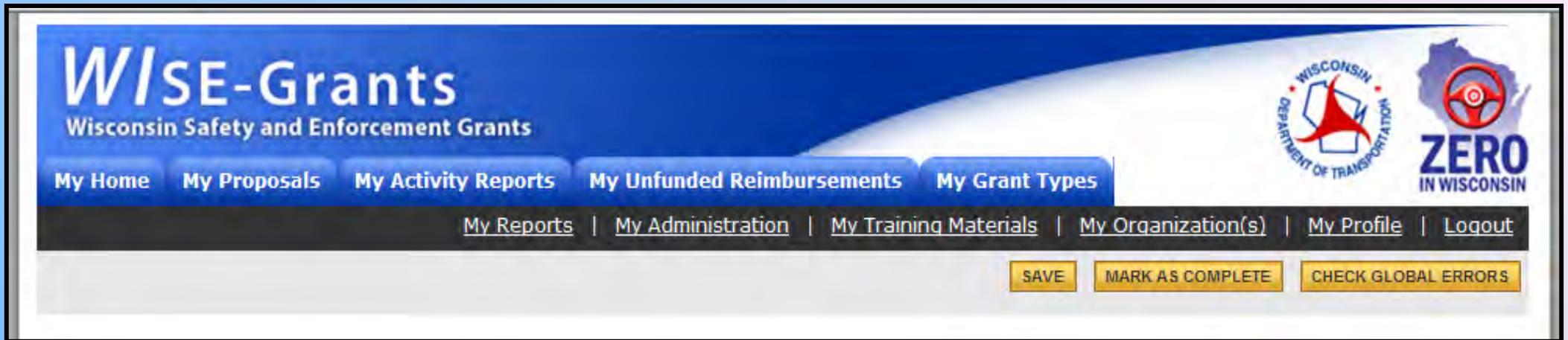
Related Documents

Sort search results by:

Document Type	Name	Current Status	Period Date / Date Due	Created By	Last Modified By
Activity Report	APR-2013-WSP HEAD-02759	Activity Report Approved	04/01/2013 - 04/30/2013 05/31/2013 11:59PM	Grant System 4/1/2013 4:01:07 AM	Mr. Larry Corsi SPM 5/29/2013 8:43:26 AM
Activity Report	DEC-2013-WSP HEAD-01211	Activity Report Approved	12/01/2012 - 12/31/2012 01/31/2013 11:59PM	Mr. David Harvey 1/23/2013 2:47:16 PM	Mr. Larry Corsi SPM 2/20/2013 9:09:00 AM <input type="button" value="SHOW HELP"/>
Activity Report	FEB-2013-WSP HEAD-02332	Activity Report Approved	02/01/2013 - 02/28/2013 03/31/2013 11:59PM	Mr. David Harvey 3/20/2013 11:11:37 AM	Mr. Larry Corsi SPM 4/4/2013 3:55:27 PM
Activity Report	JAN-2013-WSP HEAD-01815	Activity Report Approved	01/01/2013 - 01/31/2013 02/28/2013 11:59PM	Mr. David Harvey 2/20/2013 4:26:20 PM	Mr. Larry Corsi SPM 3/5/2013 12:30:02 PM
Activity Report	JUL-2013-WSP HEAD-04540	Activity Report In Process	07/01/2013 - 07/31/2013 08/31/2013 11:59PM	Grant System 7/4/2013 4:01:09 AM	Grant System 7/4/2013 4:01:09 AM
Activity Report	JUN-2013-WSP HEAD-04007	Activity Report In Process	06/01/2013 - 06/30/2013 07/31/2013 11:59PM	Grant System 6/1/2013 4:01:04 AM	Grant System 6/1/2013 4:01:04 AM
Activity Report	MAR-2013-WSP HEAD-02487	Activity Report Approved	03/01/2013 - 03/31/2013 04/30/2013 11:59PM	Grant System 3/30/2013 4:01:16 AM	Mr. Larry Corsi SPM 5/21/2013 10:54:45 AM
Activity Report	MAY-2013-WSP HEAD-03520	Activity Report Submitted/Review	05/01/2013 - 05/31/2013 06/30/2013 11:59PM	Grant System 5/1/2013 4:01:11 AM	Mr. David Harvey 6/28/2013 3:57:20 PM
Activity Report	NOV-2013-WSP HEAD-00844	Activity Report Approved	11/01/2012 - 11/30/2012 12/31/2012 11:59PM	Mr. David Harvey 12/28/2012 4:02:17 PM	Mr. Larry Corsi SPM 1/7/2013 4:16:37 PM
Activity Report	OCT-2013-WSP HEAD-00343	No Activity/Reimbursement	10/01/2012 - 10/31/2012 11/30/2012 11:59PM	Mr. David Harvey 11/16/2012 10:59:19 AM	Mr. David Harvey 11/16/2012 11:04:38 AM

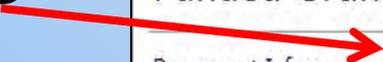
Related Messages

Sort search results by:



Completing Enforcement Activity Reports

Grant name



Select “View Related Items” under Examine Related Item from the Grant’s Main Page

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Funded Grants Menu

Document Information: [FG-2013-Black Ri-01257](#)

[Details](#)

Info	Document Type	Organization	Role	Current Status	Period Date / Date Due
	Funded Grants	Black River Falls Police Dept.	State Program Managers (SPM)	Grant Active	10/01/2012 - 09/30/2013 06/22/2013 11:59PM EST

View, Edit and Complete Forms
Select the **View Forms** button below to view, edit, and complete forms.

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Examine Related Items
Select the **View Related Items** button below to view related items such as claims, messages, etc.

[VIEW RELATED ITEMS](#)

All of the Activity Reports and their statuses are viewable on one page

➤ No Activity/Reimbursement

The grantee reported that they are not requested reimbursement for that month

➤ Modifications

The grantee needs to make a correction

➤ Submitted/Review

It is waiting for BOTS Staff to review and pay

➤ In Process

The grantee needs to complete the Activity Report

Document Information: [FG-2013-Black Ri-01268](#)
[Details](#)

Related Documents

Sort search results by:

Document Type	Name	Current Status	Period Date / Date Due	Created By	Last Modified By
Activity Report	APR-2013-Black Ri-02882	Activity Report Approved	04/01/2013 - 04/30/2013 05/31/2013 11:59PM	Grant System 4/1/2013 4:01:18 AM	Katie Mueller 7/5/2013 12:54:56 PM
Activity Report	DEC-2013-Black Ri-01575	No Activity/Reimbursement	12/01/2012 - 12/31/2012 01/31/2013 11:59PM	Tina BonDurant 2/1/2013 11:42:44 AM	Kay Larson 2/1/2013 1:43:58 PM
Activity Report	FEB-2013-Black Ri-01570	Activity Report Approved	02/01/2013 - 02/28/2013 03/31/2013 11:59PM	Katie Mueller 2/1/2013 11:20:51 AM	Katie Mueller 5/16/2013 1:21:40 PM
Activity Report	JAN-2013-Black Ri-01569	No Activity/Reimbursement	01/01/2013 - 01/31/2013 02/28/2013 11:59PM	Katie Mueller 2/1/2013 11:15:01 AM	Kay Larson 2/1/2013 2:38:14 PM
Activity Report	JUL-2013-Black Ri-04671	Activity Report In Process	07/01/2013 - 07/31/2013 08/31/2013 11:59PM	Grant System 7/4/2013 4:01:21 AM	Grant System 7/4/2013 4:01:21 AM
Activity Report	JUN-2013-Black Ri-04141	Activity Report Modifications In Process	06/01/2013 - 06/30/2013 07/31/2013 11:59PM	Grant System 6/1/2013 4:01:15 AM	Katie Mueller 7/17/2013 3:13:15 PM
Activity Report	MAR-2013-Black Ri-02270	Activity Report Approved	03/01/2013 - 03/31/2013 04/30/2013 11:59PM	Katie Mueller 3/13/2013 4:21:03 PM	Katie Mueller 5/16/2013 1:21:25 PM
Activity Report	MAY-2013-Black Ri-03651	Activity Report Submitted/Review	05/01/2013 - 05/31/2013 06/30/2013 11:59PM	Grant System 5/1/2013 4:01:24 AM	Kay Larson 6/26/2013 11:36:04 AM
Activity Report	NOV-2013-Black Ri-01568	No Activity/Reimbursement	11/01/2012 - 11/30/2012 02/18/2013 11:59PM	Katie Mueller 2/1/2013 11:14:40 AM	Kay Larson 3/13/2013 4:11:32 PM
Activity Report	OCT-2013-Black Ri-01567	No Activity/Reimbursement	10/01/2012 - 10/31/2012 03/01/2013 11:59PM	Katie Mueller 2/1/2013 11:14:27 AM	Kay Larson 3/13/2013 4:12:20 PM



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Activity Report Menu

Document Information: [MAY-2013-Black Ri-03651](#)

Parent Information: [FG-2013-Black Ri-01268](#)

[Details](#)

Info	Document Type	Organization	Role	Current Status	Period Date / Date Due
	Activity Report	Black River Falls Police Dept.	State Program Managers (SPM)	Activity Report Submitted/Review	05/01/2013 - 05/31/2013 06/30/2013 11:59PM EST

View, Edit and Complete Forms

Select the **View Forms** button below to view, edit, and complete forms.

[VIEW FORMS](#)

Change the Status

Select the **View Status Options** button below to perform actions such as submitting applications or request modifications.

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[VIEW MANAGEMENT TOOLS](#)

Examine Related Items

Select the **View Related Items** button below to view related items such as claims, messages, etc.

[VIEW RELATED ITEMS](#)

Complete two of the forms:

1. Monthly “SPD/SB/ALC” Enforcement Activity Report

- For each deployment, you will list
 - The date
 - The start and stop times
 - The hours
 - The number of Officers
 - The number of citations and warnings issued

2. Highway Safety Reimbursement Claim

- You will report
 - The total number of hours you are requesting reimbursement for
 - The total dollar amount you requesting reimbursement for
 - A spreadsheet with the wage and fringe of each officer who worked the deployments

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My Reports | My Administration | My Training Materials | My Org

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Activity Report Menu - Forms

Please complete all required forms below.

Document Information: [JUL-2013-Black Ri-04671](#)
Parent Information: [FG-2013-Black Ri-01268](#)
[Details](#)

Forms

Status	Page Name	Note	Created By
	Click here to submit your Activity Report		
Speed Enforcement			
	Monthly Speed Enforcement Activity Report		
	Monthly Speed Enforcement Activity Summary Report		
Reimbursement Claim			
	Highway Safety Reimbursement Claim		Grant System 7/4/2013 4:01:21 AM
	Final Match Report		
	Hidden Project ID		Grant System 7/4/2013 4:01:21 AM

Monthly “SPD/SB/ALC” Enforcement Activity Report

MONTHLY SPEED ENFORCEMENT ACTIVITY REPORT

Instructions:
 Please complete this page, then click the **Save** button.
 Please click the **ADD** button at the top of the page to create additional pages.
 After you have **SAVED** the page, a box will appear at the top of your screen.
 Choose the correct page from the dropdown list, click the **“GO”** button to the right to access the selected page.

Schedule													Total Citations Issued	Total Written Warnings Issued	Total Contacts				
Date	Deployment Start Time 0000 Hrs	Deployment End Time 0000 Hrs	# Officers Deployed	Total OT Hours	Straight Time Hours	Citation (C) Warning (W)	Safety Belts	Child Restraints	Speed	OWI	OAR / OAS	Open Intox	Vehicle Reg	Vehicle Equip	All Other	Total Citations Issued	Total Written Warnings Issued	Total Contacts	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>											0		N/A	
						C (OT)	<input type="text"/>	<input type="text"/>	<input type="text"/>			N/A							
						W (OT)	<input type="text"/>	<input type="text"/>	<input type="text"/>		0	N/A							
						C (Straight)	<input type="text"/>	<input type="text"/>	<input type="text"/>	0		N/A							
						W (Straight)	<input type="text"/>	<input type="text"/>	<input type="text"/>		0	N/A							
Stops with no Action																	<input type="text"/>		

		TOTALS
TOTAL CRIMINAL CONTACTS	DRUG: (all non-traffic misdemeanor & felony drug arrests)	<input type="text"/>
	FELONY: (all non-traffic and traffic related felony arrests)	<input type="text"/>
	MISDEMEANOR: (all non-traffic misdemeanor arrests/citations excluding drug)	<input type="text"/>
	WARRANT: (record the number of all warrants served)	<input type="text"/>

If you would like to include information on extraordinary events, earned media information, or other information occurring during this mobilization period, please use the text box below to describe.

0 of 2000

Click the “Browse” button below to upload supporting documents.

➤ Enter the date of the deployment

➤ Start time

➤ End time

➤ Number of Officers on the deployment

MONTHLY SPEED ENFORCEMENT ACTIVITY REPORT

Instructions:
Please complete this page, then click the **Save** button.
Please click the **ADD** button at the top of the page to create additional pages.
After you have **SAVED** the page, a box will appear at the top of your screen.
Choose the correct page from the dropdown list, click the "GO" button to the

Schedule						
Date	Deployment Start Time 0000 Hrs	Deployment End Time 0000 Hrs	# Officers Deployed	Total OT Hours	Straight Time Hours	
07/02/2013	04:00 p.m. ▼	08:00 p.m. ▼	3			
Citation (C) Warning (W)	Safety Belts	Child Restraints	Speed	OWI	OAR / OAS	Open Intox
C (OT)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
W (OT)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C (Straight)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
W (Straight)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stops with no Action						
TOTAL CRIMINAL CONTACTS	DRUG: (all non-traffic misdemeanor & felony drug arrests)					
	FELONY: (all non-traffic and traffic related felony arrests)					
	MISDEMEANOR: (all non-traffic misdemeanor arrests/citations e					
	WARRANT: (record the number of all warrants served)					

Citation (C) Warning (W)	Safety Belts	Child Restraints	Speed	OWI	OAR / OAS	Open Intox	Vehicle Reg	Vehicle Equip	All Other	Total Citations Issued	Total Written Warnings Issued	Total Contacts
C (OT)	<input type="text" value="4"/>	<input type="text"/>	<input type="text" value="8"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="4"/>	<input type="text"/>	<input type="text" value="3"/>	0		N/A
W (OT)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="2"/>	<input type="text"/>	<input type="text"/>		0	N/A
C (Straight)	<input type="text" value="2"/>	<input type="text"/>	<input type="text" value="4"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0		N/A
W (Straight)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="1"/>	<input type="text"/>		0	N/A
Stops with no Action											<input type="text" value="0"/>	

		TOTALS
TOTAL CRIMINAL CONTACTS	DRUG: (all non-traffic misdemeanor & felony drug arrests)	<input type="text"/>
	FELONY: (all non-traffic and traffic related felony arrests)	<input type="text"/>
	MISDEMEANOR: (all non-traffic misdemeanor arrests/citations excluding drug)	<input type="text"/>
	WARRANT: (record the number of all warrants served)	<input type="text" value="1"/>

- Enter the number of citations and warnings that were issued during the deployment.
 - The “total” columns will not tally until you “Save” the information
 - Citations written during reimbursable hours are listed in the C(OT) row.
 - Warnings written during reimbursable hours are listed in the W(OT) row.
 - Citations written during match hours are listed in the C (Straight) row.
 - Warnings written during match hours are listed in the W(Straight) row.
- Enter the number of stops that resulted in no action by the officer.
- List the number of arrests made and/or warrants served as a result of the deployment in the “Total Criminal Contacts” chart.

Schedule													Total Citations Issued	Total Written Warnings Issued	Total Contacts				
Date	Deployment Start Time 0000 Hrs	Deployment End Time 0000 Hrs	# Officers Deployed	Total OT Hours	Straight Time Hours	Citation (C) Warning (W)	Safety Belts	Child Restraints	Speed	OWI	OAR / OAS	Open Intox	Vehicle Reg	Vehicle Equip	All Other				
07/08/2013	06:00 p.m.	10:00 p.m.	2	8	0														
C (OT)	2		1	1												0		N/A	
W (OT)														1			0	N/A	
C (Straight)																0		N/A	
W (Straight)																	0	N/A	
Stops with no Action																			0
																	TOTALS		
DRUG: (all non-traffic misdemeanor & felony drug arrests)																			1
FELONY: (all non-traffic and traffic related felony arrests)																			
MISDEMEANOR: (all non-traffic misdemeanor arrests/citations excluding drug)																			
WARRANT: (record the number of all warrants served)																			
TOTAL CRIMINAL CONTACTS																			

An explanation of low activity is needed if there are more hours worked than citations issued during a deployment.

Enter the explanation in the text box provided for “other information.”

If you would like to include information on extraordinary events, earned media information, or other information occurring during this mobilization period, please use the text box below to describe.

Low activity is the result of both officers working on the OWI and then drug arrest as the result of a traffic stop

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Click the "Browse" button below to upload supporting documents.

Browse...

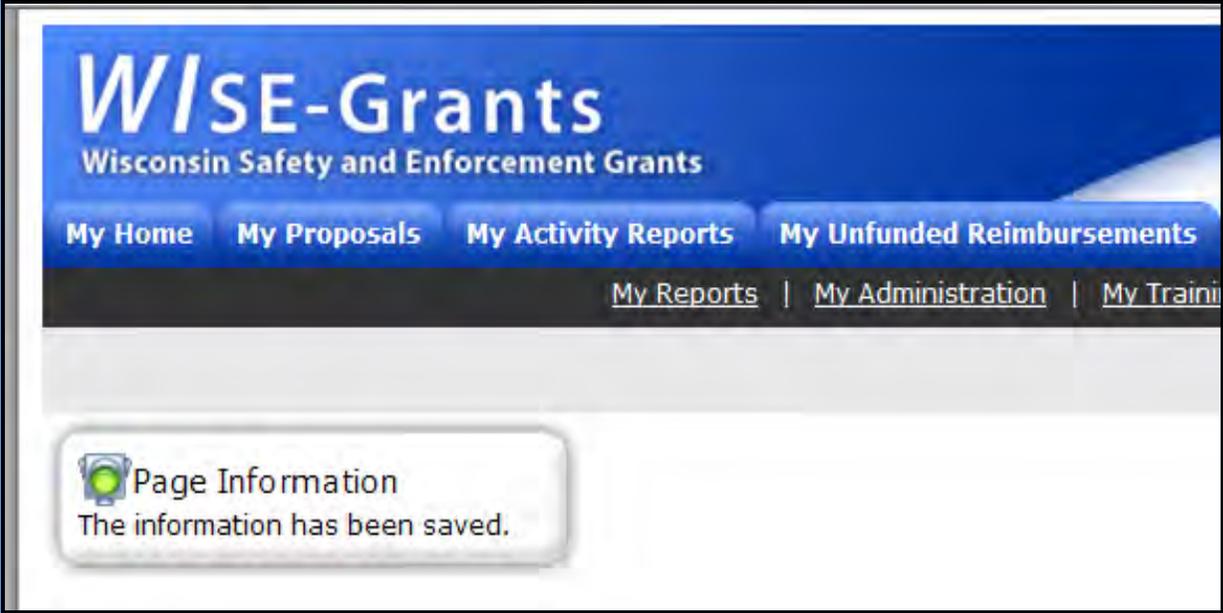
You should also upload any newspaper articles or other press coverage the deployment received

Schedule					
Date	Deployment Start Time 0000 Hrs	Deployment End Time 0000 Hrs	# Officers Deployed	Total OT Hours	Straight Time Hours
07/08/2013	06:00 p.m. ▾	10:00 p.m. ▾	2	8	0

Citation (C) Warning (W)	Safety Belts	Child Restraints	Speed	OWI	OAR / OAS	Open Intox	Vehicle Reg	Vehicle Equip	All Other	Total Citations Issued	Total Written Warnings Issued	Total Contacts
C (OT)	2		1	1						0		N/A



Select "Save" at the top of the page.



You will receive a message at the top of the page that the information was saved.

SAVE

MARK AS COMPLETE

CHECK GLOBAL ERRORS

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Parent Information: [FG-2013-Black Ri-01268](#)

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You are here: > [Activity Report Menu](#) > [Forms Menu](#)

MONTHLY SPEED ENFORCEMENT ACTIVITY REPORT

Add
New

Instructions:

Please complete this page, then click the **Save** button.

Please click the **ADD** button at the top of the page to create additional pages.

After you have **SAVED** the page, a box will appear at the top of your screen.

Choose the correct page from the dropdown list, click the "GO" button to the right to access the selected page.

Schedule					
Date	Deployment Start Time 0000 Hrs	Deployment End Time 0000 Hrs	# Officers Deployed	Total OT Hours	Straight Time Hours
07/08/2013	06:00 a.m. ▾	10:00 p.m. ▾	2	8	

Select "Add New" to report another deployment

Continue until all of the reimbursable deployments have been entered for that month

Once all of the deployments have been entered, the Highway Safety Reimbursement Claim page must be completed.

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You are here: > [Activity Report Menu](#) > [Forms Menu](#)

Select the “Forms Menu” link to return to the Forms page

MONTHLY SPEED ENFORCEMENT ACTIVITY REPORT

Instructions:

Please complete this page, then click the **Save** button.
Please click the **ADD** button at the top of the page to create additional pages.
After you have **SAVED** the page, a box will appear at the top of your screen.
Choose the correct page from the dropdown list, click the **GO** button to the right to access the selected page.

Schedule					
Date	Deployment Start Time 0000 Hrs	Deployment End Time 0000 Hrs	# Officers Deployed	Total OT Hours	Straight Time Hours
07/08/2013	06:00 a.m.	10:00 p.m.	2	8	



SHOW HELP

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Activity Report Menu - Forms

Please complete all required forms below.

Document Information: [JUL-2013-Black Ri-04671](#)

Parent Information: [FG-2013-Black Ri-01268](#)

[Details](#)

Select the "Highway Safety Reimbursement Claim" page

Forms

Status	Page Name	Note	Created By	Last Modified By
	Click here to submit your Activity Report			
Speed Enforcement				
	Monthly Speed Enforcement Activity Report			
	Monthly Speed Enforcement Activity Summary Report		Katie Mueller	7/18/2013 2:55:29 PM
Reimbursement Claim				
	Highway Safety Reimbursement Claim		Grant System	7/4/2013 4:01:21 AM
	Final Match Report			
	Hidden Project ID		Grant System	7/4/2013 4:01:21 AM

1. The number of hours for which you are requesting reimbursement

2. The dollar amount you are asking to be reimbursed

3. A spreadsheet with the wage and fringe of the officers who worked the reimbursable deployments

4. A denotation indicating final payment

On this page you must enter:

SAVE PRINT VERSION ADD NOTE MARK AS COMPLETE CHECK GLOBAL ERRORS

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Document Information: [JUL-2013-Black Ri-04671](#)
Parent Information: [FG-2013-Black Ri-01268](#)
[Details](#)

You are here: > [Activity Report Menu](#) > [Forms Menu](#) > Reimbursement Claim

HIGHWAY SAFETY REIMBURSEMENT CLAIM

Instructions:
Please complete this page, then click the **Save** button.
Required fields are marked with an *.

Is This the Final Payment?* Yes No

Number of OT Hours *

	Grant Amount	Claim To Date	This Claim	Balance
Wage & Fringe	\$9,694.88	\$4,919.10	<input type="text"/> \$0	\$0
Travel & Training	\$0	\$0	<input type="text"/> \$0	\$0
Contractual Services	\$0	\$0	<input type="text"/> \$0	\$0
Equipment	\$4,751.84	\$4,751.84	<input type="text"/> \$0	\$0
Materials & Supplies	\$0	\$0	<input type="text"/> \$0	\$0
Other	\$0	\$0	<input type="text"/> \$0	\$0
Total	\$0	\$0	\$0	\$0

Click the "Browse" button below to upload supporting documents.
You may use the Wages & Fringe Supporting Documentation template found [Here](#).
If you choose to upload your own supporting documents for Wages & Fringe, please review this template for the minimum elements required to support reimbursement requests.

Browse... *
 Browse...
 Browse...
 Browse...
 Browse...
 Browse...
 Browse...

HIGHWAY SAFETY REIMBURSEMENT CLAIM

Instructions:

Please complete this page, then click the **Save** button.
Required fields are marked with an *.

Is This the Final Payment? * Yes No

Number of OT Hours *

Fill in appropriate oval regarding the Final Payment.

You will only select “Yes” when completing the Activity Report for last month of the grant year.

Enter the number of hours for which you are requesting reimbursement in the “Number of OT Hours” field.

“Number of OT Hours” field will also change for the 2014 Grant year. It will soon read “Number of reimbursable hours.”

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You are here: > [Activity Report Menu](#) > [Forms Menu](#) > Reimbursement Claim

HIGHWAY SAFETY REIMBURSEMENT CLAIM

Instructions:
 Please complete this page, then click the **Save** button.
 Required fields are marked with an *.

Is This the Final Payment?* Yes No

Number of OT Hours *

	Grant Amount	Claim To Date	Unis Claim	Balance
Wage & Fringe	\$9,694.88	\$4,919.10	<input type="text" value="1600"/>	\$0
Travel & Training	\$0	\$0	<input type="text" value="\$0"/>	\$0
Contractual Services	\$0	\$0	<input type="text" value="\$0"/>	\$0
Equipment	\$4,751.84	\$4,751.84	<input type="text" value="4010"/>	\$0
Materials & Supplies	\$0	\$0	<input type="text" value="\$0"/>	\$0
Other	\$0	\$0	<input type="text" value="\$0"/>	\$0
Total	\$0	\$0	\$0	\$0

Click the "Browse" button below to upload supporting documents.
 You may use the Wages & Fringe Supporting Documentation template found [Here](#).
If you choose to upload your own supporting documents for Wages & Fringe, please review this template for the minimum support reimbursement requests.

*

Enter the dollar amount you are asking to be reimbursed.

If requesting reimbursement for equipment, enter the amount reimbursable amount in the "Equipment" row

The "total" column will not tally until you select the "Save" button

HIGHWAY SAFETY REIMBURSEMENT CLAIM

Instructions:

Please complete this page, then click the **Save** button.
Required fields are marked with an *.

Is This the Final Payment?* Yes No

Number of OT Hours *

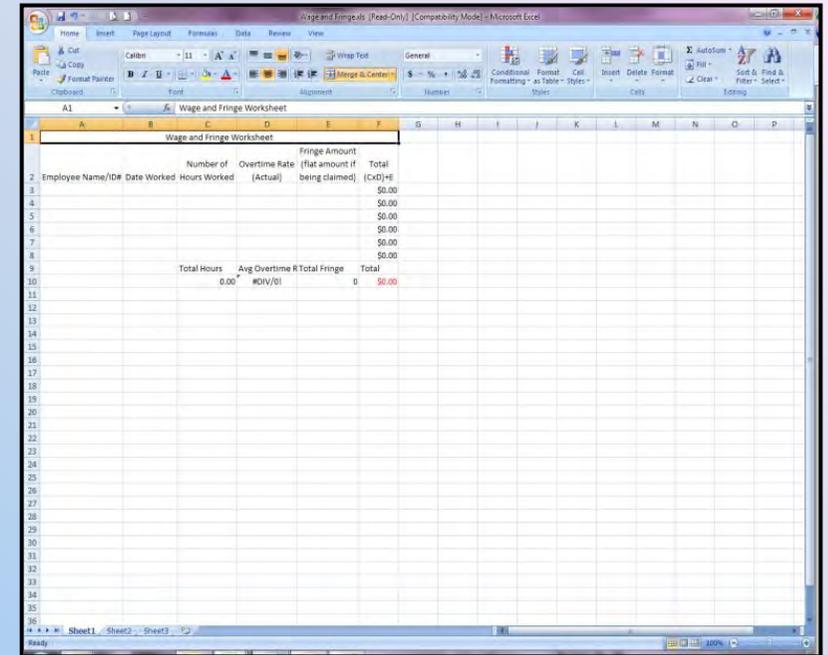
	Grant Amount	Claim To Date	This Claim	Balance
Wage & Fringe	\$9,694.88	\$4,919.10	<input type="text" value="1600"/>	\$0
Travel & Training	\$0	\$0	<input type="text" value="\$0"/>	\$0
Contractual Services	\$0	\$0	<input type="text" value="\$0"/>	\$0
Equipment	\$4,751.84	\$4,751.84	<input type="text" value="\$0"/>	\$0
Materials & Supplies	\$0	\$0	<input type="text" value="\$0"/>	\$0
Other	\$0	\$0	<input type="text" value="\$0"/>	\$0
Total	\$0	\$0	\$0	\$0

Click the "Browse" button below to upload supporting documents.

You may use the Wages & Fringe Supporting Documentation template found [Here](#).

If you choose to upload your own supporting documents for Wages & Fringe, please review this template for support reimbursement requests.

*



A Wage and Fringe Template is available on this page

Wage and Fringe.xls [Read-Only] [Compatibility Mod

Home Insert Page Layout Formulas Data Review View

Cut Copy Paste Format Painter Clipboard

Calibri 11 A A

B I U

Font

Alignment

Wrap Text Merge & Center

General

\$ %

Number

A1 Wage and Fringe Worksheet

	A	B	C	D	E	F	G	H	
1	Wage and Fringe Worksheet								
2	Employee Name/ID#	Date Worked	Number of Hours Worked	Overtime Rate (Actual)	Fringe Amount (flat amount if being claimed)	Total (CxD)+E			
3	Thompson	7/2/2013	4.00	46.00000	100	\$284.00			
4	Johnson	7/2/2013	4.00	46.00000	100	\$284.00			
5	Smith	7/2/2013	4.00	46.00000	100	\$284.00			
6						\$0.00			
7						\$0.00			
8						\$0.00			
9			Total Hours	Avg Overtime R	Total Fringe	Total			
10			12.00	46.00000	300	\$852.00			
11									
12									
13									
14									
15									
16									
17									
18									

You must attach a spreadsheet that lists the date, hours, wage and fringe of the officers who worked the deployments.

SAVE

PRINT VERSION

ADD NOTE

MARK AS COMPLETE

CHECK GLOBAL ERRORS

HIGHWAY SAFETY REIMBURSEMENT CLAIM

Instructions:

Please complete this page, then click the **Save** button.
Required fields are marked with an *.

Is This the Final Payment?* Yes No

Number of OT Hours *

	Grant Amount	Claim To Date	This Claim	Balance
Wage & Fringe	\$9,694.88	\$4,919.10	<input type="text" value="852"/>	\$0
Travel & Training	\$0	\$0	<input type="text" value="\$0"/>	\$0
Contractual Services	\$0	\$0	<input type="text" value="\$0"/>	\$0
Equipment	\$4,751.84	\$4,751.84	<input type="text"/>	\$0
Materials & Supplies	\$0	\$0	<input type="text" value="\$0"/>	\$0
Other	\$0	\$0	<input type="text" value="\$0"/>	\$0
Total	\$0	\$0	\$0	\$0

Click the "Browse" button below to upload supporting documents.

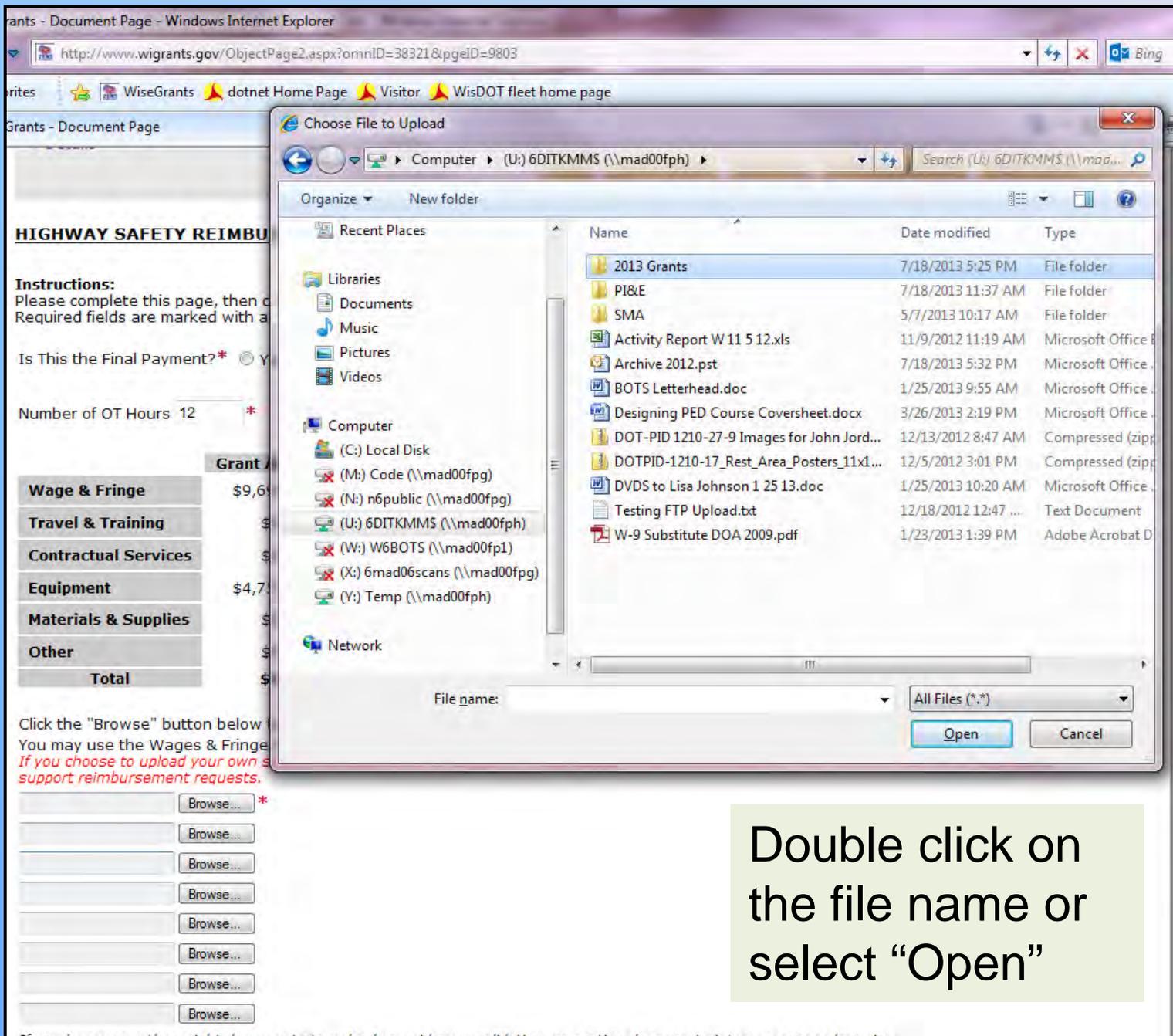
You may use the Wages & Fringe Supporting Documentation template found [Here](#).

If you choose to upload your own supporting documents for Wages & Fringe, please review this template for the minimum elements required to support reimbursement requests.

*

Select the "Browse" Button

If you have more than eight documents to upload, consider consolidating supporting documents into one scanned version.



The files from your computer will now be available

Find the Wage and Fringe Spreadsheet on your computer

Double click on the file name or select "Open"

The file will appear in the box next to the "Browse" button

If you are asking for reimbursement for equipment, you must also attach a copy of the invoice and a copy of the check or credit card used to purchase the equipment

HIGHWAY SAFETY REIMBURSEMENT CLAIM

Instructions:

Please complete this page, then click the **Save** button. Required fields are marked with an *.

Is This the Final Payment? * Yes No

Number of OT Hours *

	Grant Amount	Claim To Date	This Claim	Balance
Wage & Fringe	\$9,694.88	\$4,919.10	<input type="text" value="852"/>	\$0
Travel & Training	\$0	\$0	<input type="text" value="\$0"/>	\$0
Contractual Services	\$0	\$0	<input type="text" value="\$0"/>	\$0
Equipment	\$4,751.84	\$4,751.84	<input type="text"/>	\$0
Materials & Supplies	\$0	\$0	<input type="text" value="\$0"/>	\$0
Other	\$0	\$0	<input type="text" value="\$0"/>	\$0
Total	\$0	\$0	\$0	\$0

Click the "Browse" button below to upload supporting documents.

You may use the Wages & Fringe Supporting Documentation template found [Here](#).

If you choose to upload your own supporting documents for Wages & Fringe, please review this template support reimbursement requests.

U:\Activity Report W 11 E *

The file is not attached until you select the "Save" button

If you have more than eight documents to upload, consider consolidating supporting documents into a

Select the "Save" button

HIGHWAY SAFETY REIMBURSEMENT CLAIM

Instructions:

Please complete this page, then click the **Save** button.
Required fields are marked with an *.

Is This the Final Payment? * Yes No

Number of OT Hours *

	Grant Amount	Claim To Date	This Claim	Balance
Wage & Fringe	\$9,694.88	\$4,919.10	<input type="text" value="852"/>	\$0
Travel & Training	\$0	\$0	<input type="text" value="\$0"/>	\$0
Contractual Services	\$0	\$0	<input type="text" value="\$0"/>	\$0
Equipment	\$4,751.84	\$4,751.84	<input type="text"/>	\$0
Materials & Supplies	\$0	\$0	<input type="text" value="\$0"/>	\$0
Other	\$0	\$0	<input type="text" value="\$0"/>	\$0
Total	\$0	\$0	\$0	\$0

Click the "Browse" button below to upload supporting documents.

You may use the Wages & Fringe Supporting Documentation template found [Here](#).

If you choose to upload your own supporting documents for Wages & Fringe, please review this template for the minimum elements required to support reimbursement requests.

U:\Activity Report W 11 8 Browse... *

Browse...

Browse...

Browse...

Browse...

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 Page Information

The information has been saved.

You will receive a message at the top of the page that the information was saved.

Wage and Fringe Worksheet						
	A	B	C	D	E	F
1	Wage and Fringe Worksheet					
2	Employee Name/ID#	Date Worked	Number of Hours Worked	Overtime Rate (Actual)	Fringe Amount (flat amount if being claimed)	Total (CxD)+E
3	Thompson	7/2/2013	4.00	46.00000	100	\$284.00
4	Johnson	7/2/2013	4.00	46.00000	100	\$284.00
5	Smith	7/2/2013	4.00	46.00000	100	\$284.00
6						\$0.00
7						\$0.00
8						\$0.00
9			Total Hours	Avg Overtime R	Total Fringe	Total
10			12.00	46.00000	300	\$852.00
11						

Double check your work!

Compare your Wage and Fringe Spreadsheet to the Reimbursement page and the Activity Reports

Do the total number of hours match?

Yes!

Does the dollar amount requested for reimbursement match?

Yes!!

Are the correct hours, dates, and officers reported on the Activity Reports?

Yes!!!!

SAVE PRINT VERSION

HIGHWAY SAFETY REIMBURSEMENT CLAIM

Instructions:
Please complete this page, then click the **Save** button.
Required fields are marked with an *.

Is This the Final Payment?* Yes No

Number of OT Hours *

	Grant Amount	Claim To Date	This Claim	Balance
Wage & Fringe	\$9,694.88	\$4,919.10	<input type="text" value="852"/>	\$0
Travel & Training	\$0	\$0	<input type="text" value="\$0"/>	\$0
Contractual Services	\$0	\$0	<input type="text" value="\$0"/>	\$0
Equipment	\$4,751.84	\$4,751.84	<input type="text"/>	\$0
Materials & Supplies	\$0	\$0	<input type="text" value="\$0"/>	\$0

Submit your report for reimbursement

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Select the Monthly Activity Report link at the top of the page

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Activity Report Menu

Document Information: [JUL-2013-Black Ri-04671](#)

Parent Information: [FG-2013-Black Ri-01268](#)

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Info	Document Type	Organization	Role	Current Status	Period Date / Date Due
	Activity Report	Black River Falls Police Dept.	Project Coordinator	Activity Report In Process	07/01/2013 - 07/31/2013 08/31/2013 11:59PM EST

View, Edit and Complete Forms

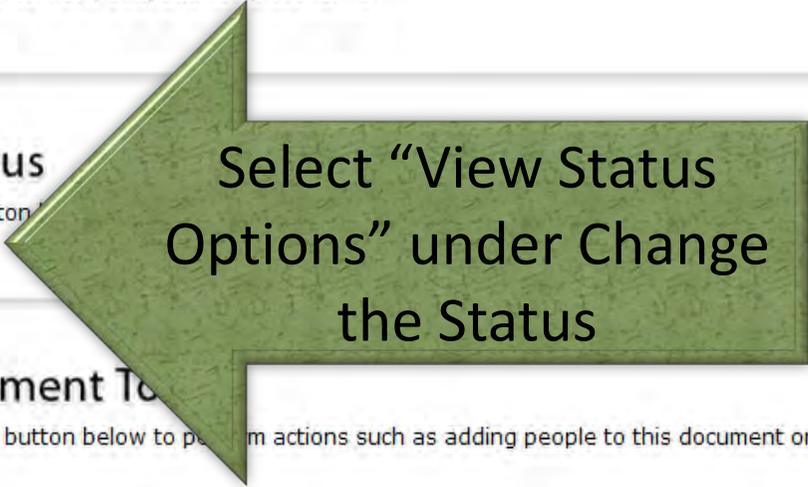
Select the **View Forms** button below to view, edit, and complete forms.

[VIEW FORMS](#)

Change the Status

Select the **View Status Options** button below to view status options.

[VIEW STATUS OPTIONS](#)



Select "View Status Options" under Change the Status

Access Management Tools

Select the **View Management Tools** button below to perform actions such as adding people to this document or viewing the document history.

[VIEW MANAGEMENT TOOLS](#)

Examine Related Items

Select the **View Related Items** button below to view related items such as claims, messages, etc.

[VIEW RELATED ITEMS](#)

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Activity Report Menu - Status Options

Select a button below to execute the appropriate status push.

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Select "Click Here to Submit" under Activity Report Submitted/Review

Possible Statuses

ACTIVITY REPORT SUBMITTED/REVIEW

Click the button below to submit your Activity Report. It will be reviewed by WIBOTS staff prior to approval.

[CLICK HERE TO SUBMIT!](#)

NO ACTIVITY/REIMBURSEMENT

Click here to confirm no activity/reimbursement request for the month

[CLICK HERE FOR NO ACTIVITY/REIMBURSEMENT](#)

[Top of the Page](#)

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Agreement

Please make a selection below to continue.

Are you sure you want to approve this Activity Report?

If you would like to include notes about this status change, please supply them below.

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You can add any comments or information in the text box.

Select "I Agree"

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You must submit a “No Activity/Reimbursement” Report if you are not requesting reimbursement or submitting match hours for that month

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Activity Report Menu - Status Options

Select a button below to execute the appropriate status push.

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Possible Statuses

ACTIVITY REPORT SUBMITTED/REVIEW
Click the button below to submit your Activity Report. It will be reviewed by WIBOT
[CLICK HERE TO SUBMIT!](#)

NO ACTIVITY/REIMBURSEMENT
Click here to confirm no activity/reimbursement request for the month
[CLICK HERE FOR NO ACTIVITY/REIMBURSEMENT](#)

[Top of the](#)
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Your other option under “Status Options” is a “No/Activity Reimbursement”

Select “Click Here for No Activity/ Reimbursement”

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Agreement

Please make a selection below to continue.

Are you sure you want to cancel this Activity Report?

If you would like to include notes about this status change, please supply them below.

0 of 2000

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Select
"I Agree"

Notes

The Notepad icon next to a form page means that there is a note attached to that page

[Back](#)

Activity Report Menu - Forms

Please complete all required forms below.

Document Information: [MAY-2013-Black Ri-03649](#)
Parent Information: [FG-2013-Black Ri-01257](#)
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Forms

Status	Page Name	Note	Created By	Last Modified By
	Click here to submit your Activity Report			
Alcohol Enforcement				
	Monthly Alcohol Enforcement Activity Report (6)			
	Monthly Alcohol Safety Enforcement Activity Summary Report		Kay Larson 6/25/2013 7:54:42 PM	
Reimbursement Claim				
	Highway Safety Reimbursement Claim		Grant System 5/1/2013 4:01:24 AM	Katie Mueller 7/16/2013 6:47:16 PM
	Final Match Report			
	Hidden Project ID		Grant System 5/1/2013 4:01:24 AM	



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Document Information: [MAY-2013-Black Ri-03649](#)

Parent Information: [FG-2013-Black Ri-01257](#)

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You are here: > [Activity Report Menu](#) > [Forms Menu](#) > Reimbursement Claim

HIGHWAY SAFETY REIMBURSEMENT CLAIM

You will see a number in parenthesis (2) next to “Show Notes” to display the number of notes.

 Notes

Drag Here

Message	Author	Date	Action
Equipment	Katie Mueller	7/5/2013	Edit
NO SUBJECT	Kay Larson	7/5/2013	Reply

[ADD A NEW NOTE](#)

[CLOSE NOTES](#)

Click on “Show Notes” to see the list of notes.

Instructions:

Please complete this page, then click the Save button.

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My Reports | My Administration | My Training Materials | My Organization(s) | My Profile

SAVE | PRINT VERSION | SHOW NOTES (2) | CHECK GLOBAL

Notes

Message	Author	Date	Action
Equipment	Katie Mueller	7/5/2013	Edit
NO SUBJECT	Kay Larson	7/5/2013	Reply

ADD A NEW NOTE | CLOSE NOTES

Click on the message to open the note

You can reply to a note or create a new one

WISE-Grants
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SAVE | PRINT VERSION | SHOW NOTES (2) | CHECK GLOBAL ERRORS

Notes

Message	Author	Date	Action
Equipment Please attach a copy of the equipment invoice and a copy of the check or credit card used to pay for the equipment. Submitted: 7/5/2013 11:47:52 AM	Katie Mueller	7/5/2013	Edit
NO SUBJECT	Kay Larson	7/5/2013	Reply

ADD A NEW NOTE | CLOSE NOTES

Is This the Final Payment? * Yes No

Notes are often left by SPMs informing the grantee of corrections that need to be made

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HOW TO VIEW THE STATUS HISTORY OF AN ACTIVITY REPORT

[Back](#)

Activity Report Menu

Document Information: [MAY-2013-Black Ri-03651](#)

Parent Information: [FG-2013-Black Ri-01268](#)

[Details](#)

Info	Document Type	Organization	Role	Current Status	Period Date / Date Due
	Activity Report	Black River Falls Police Dept.	State Program Managers (SPM)	Activity Report Submitted/Review	05/01/2013 - 05/31/2013 06/30/2013 11:59PM EST

View, Edit and Complete Forms

Select the **View Forms** button below to view, edit, and complete forms.

[VIEW FORMS](#)

Change the Status

Select the **View Status Options** button below to perform actions such as submitting applications or request modifications.

[VIEW STATUS OPTIONS](#)

Select "View Management Tools" under Access Management Tools

Access Management Tools

Select the **View Management Tools** button below to perform actions such as adding people to this document or viewing the document history.

[VIEW MANAGEMENT TOOLS](#)

Examine Related Items

Select the **View Related Items** button below to view related items such as claims, messages, etc.

[VIEW RELATED ITEMS](#)

[Back](#)

Activity Report Menu - Management Tools

The menu below contains links to the tools that can be used to manage this document. See the description below each link for more detail.

Document Information: [JUL-2013-Black Ri-04671](#)

Parent Information: [FG-2013-Black Ri-01268](#)

[Details](#)

Management Tools

 **[CREATE FULL PRINT VERSION](#)**

Select the link above to create a printable version of the document.

 **[ADD/EDIT PEOPLE](#)**

Select the link above to perform actions such as adding people, changing a security role, or altering people's active dates on this document.

 **[STATUS HISTORY](#)**

Select the link above to view the status history of this document.

 **[CHECK FOR ERRORS](#)**

Select the link above to check the entire document for errors.

 **[ATTACHMENT REPOSITORY](#)**

Select the link above to view all attachments in this document.

Select "Status History" from the list of Management Tools

 [Back](#)

Activity Report Menu - Status History

Below are the details for the status history of this document.

Document Information: [APR-2013-Black Ri-02882](#)

Parent Information: [FG-2013-Black Ri-01268](#)

 [Details](#)

You can view comments that the RPM or SPM has left, review the status of the activity report and view any information you left before selecting "I agree."

Info	Document Type	Organization	Role	Current Status	Period Date / Date Due
	Activity Report	Black River Falls Police Dept.	State Program Managers (SPM)	Activity Report Approved	04/01/2013 - 04/30/2013 05/31/2013 11:59PM EST

Document Status History

Status	Date/Time	By	Notes
Activity Report In Process	4/1/2013 4:01:18 AM	System, Grant	
Activity Report Submitted/Review	5/22/2013 1:07:34 PM	Larson, Kay	
Activity Report Modifications In Process	6/12/2013 6:08:38 PM	Mueller, Katie	
Activity Report Modifications Submitted	6/25/2013 4:59:36 PM	Larson, Kay	I believe everything was changed that needed to be changed. Please note, Noack worked two 4 hour shifts on the 4th of April.
Activity Report Submitted/Review	6/25/2013 4:59:36 PM	Larson, Kay	I believe everything was changed that needed to be changed. Please note, Noack worked two 4 hour shifts on the 4th of April.
Activity Report Modifications In Process	6/26/2013 9:56:01 AM	Corsi SPM, Mr. Larry	Please remove equipment reimbursement, Wage/Fringe reimbursement must be equal to or greater than then the equipment reimbursement.
Activity Report Modifications Submitted	6/26/2013 11:29:06 AM	Larson, Kay	
Activity Report Submitted/Review	6/26/2013 11:29:06 AM	Larson, Kay	
Activity Report Approved	7/5/2013 12:54:56 PM	Mueller, Katie	

Match

A 25% Match is
required



Match can be reported
monthly or once at the
conclusion of the grant.

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Activity Report Menu - Forms

Please complete all required forms below.

Document Information: [JUL-2013-Black Ri-04671](#)

Parent Information: [FG-2013-Black Ri-01268](#)

[Details](#)

Forms

Status	Page Name	Note	Created By	Last Modified By
	Click here to submit your Activity Report			
Spent Enforcement				
	Monthly Speed Enforcement Activity Report			
	Monthly Speed Enforcement Activity Summary Report		Katie Mueller	7/18/2013 2:55:29 PM
Reimbursement Claim				
	Highway Safety Reimbursement Claim		Grant System	7/4/2013 4:01:21 AM
	Final Match Report			
	Hidden Project ID		Grant System	7/4/2013 4:01:21 AM

The match reporting is done either with individual Activity Reports or each month's "Final Match Report"

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**HOW DO I UPDATE MY
ORGANIZATION'S
INFORMATION OR ADD A
NEW STAFF PERSON?**



Welcome Tina

Administrative Staff

[Change My Picture](#)

Instructions:

Select the **SHOW HELP** button above for detailed instructions on the following.

- > Applying for an Opportunity
- > Using System Messages
- > Understanding your Tasks
- > Managing your awarded grant

Hello Tina, please choose an option below.

View Available Opportunities

You have **3** My Opportunities available.

Select the **View Opportunities** button below to see what is available.

[VIEW OPPORTUNITIES](#)

My Inbox

You have **0** new messages.

Select the **Open My Inbox** button below to open your system inbox.

[OPEN MY INBOX](#)

My Tasks

You have **1033** new tasks.

You have **302** tasks that are critical.

Select the **Open My Tasks** button below to view your active tasks.

[OPEN MY TASKS](#)

TO UPDATE ANY ORGANIZATION
CONTACT INFORMATION
- Click on the My Administration Link

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Organization - bots

Please complete all the required fields below. Required fields are marked with an *.

[Organization Information](#) | [Organization Members](#) | [Organization Documents](#)

Organization Information

Name	<input type="text" value="bots"/> *		
Short Name	<input type="text" value="BOTS"/> *		
Address	<input type="text" value="PO Box 7936"/> *		
City	<input type="text" value="Madison"/> * State	<input type="text" value="Wisconsin"/> * Zipcode	<input type="text" value="53707"/> *
County	<input type="text" value="Dane County"/> *		
Phone	<input type="text" value="608-266-0402"/> * Fax	<input type="text"/>	
Email	<input type="text"/>		
Website	<input type="text"/>		

Organization Categories

<input type="checkbox"/> Category	Description
<input type="checkbox"/>	Dealerships
<input checked="" type="checkbox"/>	Law Enforcement Agency
<input type="checkbox"/>	Local Government
<input type="checkbox"/>	Non Profits
<input type="checkbox"/>	Private Sites
<input checked="" type="checkbox"/>	State Agencies
<input type="checkbox"/>	Technical Schools

• You can change any of the fields listed.

• All fields with a **RED *** are required.

• Once you have made all the necessary changes **CLICK Save**

[Back](#)

Organization - bots

Please complete all the required fields below. Required fields are marked with an *.

[Organization Information](#) | [Organization Members](#) | [Organization Documents](#)

Organization Information

Name *

Short Name *

Address *

City * **State** * **Zipcode** *

County *

Phone * **Fax**

Email

Website

Organization Categories

<input type="checkbox"/> Category	Description
<input type="checkbox"/>	Dealerships
<input checked="" type="checkbox"/>	Law Enforcement Agency
<input type="checkbox"/>	Local Government
<input type="checkbox"/>	Non Profits
<input type="checkbox"/>	Private Sites
<input checked="" type="checkbox"/>	State Agencies
<input type="checkbox"/>	Technical Schools

TO UPDATE A STAFF MEMBER OR
ADD A NEW MEMBER
- Click on the Organization Members
Link

To update a Staff member's information.

- Click on the Persons Name

Back

Organization - bots

Follow the instructions listed below to add/remove/modify organization members.

[Organization Information](#) | [Organization Members](#) | [Organization Documents](#)

Organization Members

Administrators with the authority to add members to your organization can follow these steps:
To add a member to your organization, select the **Add Members** link below.
If a member has already added his/her information in the system, you can search for the member.
If you need to add a member's information into the system, select **New Member**.
For more detailed instructions, select the **Show Help** button above.

[Current Members](#) | [Add Members](#)

Sort By: -----SELECT----- GO

<input type="checkbox"/>	Person	Role	Active Dates	Active Documents	Assigned By	Modified By
<input checked="" type="checkbox"/>	BonDurant, Tina	Administrative Staff	4/24/2012	2	Schwabe, Ms. Vicki 4/24/2012	Schwabe, Ms. Vicki 5/23/2012
<input checked="" type="checkbox"/>	Lind, Michele	Administrative Staff	2/14/2013		Schwabe, Ms. Vicki 2/14/2013	
<input type="checkbox"/>			7/21/2010	1	Admin, Mr. System 7/21/2010	
<input type="checkbox"/>			8/3/2011		Schwabe, Ms. Vicki 8/3/2011	

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Organization - bots

Follow the instructions listed below to add/remove/modify organization members.

[Organization Information](#) | [Organization Members](#) | [Organization Documents](#)

Organization Members

[Current Members](#) | [Add Members](#)

Name: Prefix First * Middle Last * Suffix

Title: Financial Specialist

Email: tina.bondurant@dot.wi.gov *

Username: *

Password: Confirm Password:

Date Active: 2/14/2013 Date Inactive:

Role: Administrative Staff *

The fields below are populated with the Organization information by default. However, you may edit the information in any of the fields. This information may also be edited by the person you are creating the profile for from their My Profile page.

Address: PO Box 7936 *

City: Madison * State: Wisconsin * Zipcode: 53707 *

County: Dane County *

Phone #1: (608) 266-0402 * Phone #2:

Fax: Cell Phone:

Website:

- All fields with a **RED *** are required
- You will not be able to change a person's username or password
- When all the updates are done **CLICK Save**

SAVE SHOW HELP

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Organization - bots

Follow the instructions listed below to add/remove/modify organization members.

[Organization Information](#) | [Organization Members](#) | [Organization Documents](#)

Organization Members

Administrators with the authority to add members to your organization can follow these steps:
To add a member to your organization, select the **Add Members** link below.
If a member has already added his/her information in the system, you can search for the member.
If you need to add a member's information into the system, select **New Member**.
For more detailed instructions, select the **Show Help** button above.

[Current Members](#) | [Add Members](#)

Sort By:

Person	Role	Active Dates	Active Documents	Assigned By	Modified By
<input checked="" type="checkbox"/> BonDurant, Tina	Administrative Staff	4/24/2012 - <input type="text"/>	2	Schwabe, Ms. Vicki 4/24/2012	Schwabe, Ms. Vicki 5/23/2012
<input checked="" type="checkbox"/> Lind, Michele	Administrative Staff	2/14/2013 - <input type="text"/>		Schwabe, Ms. Vicki 2/14/2013	
<input checked="" type="checkbox"/> Andreasson, Ms. Laura	Chief Financial Officer (CFO)	7/21/2010 - <input type="text"/>	1	Admin, Mr. System 7/21/2010	
<input checked="" type="checkbox"/> Huxtable, Sandra	Director	8/3/2011 - <input type="text"/>		Schwabe, Ms. Vicki 8/3/2011	

TO ADD A NEW MEMBER
- Click on Add Members

- Click NEW Member

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SAVE SHOW HELP

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Organization - bots

Follow the instructions listed below to add/remove/modify organization members.

[Organization Information](#) | [Organization Members](#) | [Organization Documents](#)

Organization Members

Administrators with the authority to add members to your organization can follow these steps:
To add a member to your organization, select the **Add Members** link below.
If a member has already added his/her information in the system, you can search for the member.
If you need to add a member's information into the system, select **New Member**.
For more detailed instructions, select the **Show Help** button above.

[Current Members](#) | [Add Members](#)

Person Search

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- All fields with a **RED *** are required.

- You will only be able to add someone with the same role as yours.

- Once you have made all the necessary changes **CLICK Save**

- Please contact Michele Lind or Tina BonDurant after you have added a new member.

michele.lind@dot.wi.gov
tina.bondurant@dot.wi.gov

SAVE & ADD TO ORGANIZATION **SHOW HELP**

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Organization - bots

Follow the instructions listed below to add/remove/modify organization members.

[Organization Information](#) | [Organization Members](#) | [Organization Documents](#)

Add/Edit Members

Administrators with the authority to add members to your organization can follow these steps:
Please complete the information below. All required fields are marked with an *.

Name	Prefix	First	Middle	Last	Suffix
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Title	<input type="text"/>				
Email	<input type="text"/>				
Username	<input type="text"/>				
Password	<input type="text"/>		Confirm Password	<input type="text"/>	
Date Active	<input type="text"/>		Date Inactive	<input type="text"/>	
Role	<input type="text"/>				

The fields below are populated with the Organization information by default. However, you may edit the information in any of the fields. This information may also be edited by the person you are creating the profile for from their My Profile page.

Address	<input type="text"/>				
City	<input type="text"/>	State	<input type="text"/>	Zipcode	<input type="text"/>
County	<input type="text"/>				
Phone #1	<input type="text"/>	Phone #2	<input type="text"/>		
Fax	<input type="text"/>	Cell Phone	<input type="text"/>		
Website	<input type="text"/>				

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Organization - MADISON PD TOWN OF

Please complete all the required fields below. Required fields are marked with an *.

[Organization Information](#) | [Organization Members](#) | [Organization Documents](#)

Organization Information

Name *

Short Name *

Address *

City * **State** * **Zipcode** *

County *

Phone * **Fax**

Email

Website



When you click on Organization Documents You will find **ALL** documents associated with your agency! **Multiple years, every grant and activity report connected to your agency.**

Activity Report	APR-2011-MADISON -01712	Activity Report Approved	2011
Activity Report	APR-2011-MADISON -01713	No Activity/Reimbursement	2011
Activity Report	AUG-2011-MADISON -03993	Activity Report In Process	2011
Activity Report	AUG-2011-MADISON -04237	Activity Report In Process	2011
Activity Report	FEB-2011-MADISON -01126	Activity Report Approved	2011
Activity Report	FEB-2011-MADISON -01127	No Activity/Reimbursement	2011
Activity Report	JAN-2011-MADISON -00674	Activity Report Approved	2011
Activity Report	JAN-2011-MADISON -00768	Activity Report Approved	2011
Activity Report	JUL-2011-MADISON -03601	Activity Report In Process	2011
Activity Report	JUL-2011-MADISON -03602	Activity Report In Process	2011
Activity Report	JUN-2011-MADISON -03172	Activity Report Approved	2011
Activity Report	JUN-2011-MADISON -03173	No Activity/Reimbursement	2011
Activity Report	MAR-2011-MADISON -01392	Activity Report Approved	2011
Activity Report	MAR-2011-MADISON -01393	Activity Report Approved	2011
Activity Report	MAY-2011-MADISON -02564	Activity Report Approved	2011
Activity Report	MAY-2011-MADISON -02565	No Activity/Reimbursement	2011
Activity Report	OCT-2011-MADISON -00113	Activity Report Approved	2011
Activity Report	OCT-2011-MADISON -02870	No Activity/Reimbursement	2011
Funded Grants	FG-2011-MADISON -00108	Amendment Submitted	2011
Funded Grants	FG-2011-MADISON -00249	Grant Active	2011

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Questions?