Department of Military and Veterans Affairs
Regulation 5-1-1
63-101-1 ANG

DEPARTMENT OF MILITARY AND VETERANS AFFAIRS
OFFICE OF THE ADJUTANT GENERAL
Centennial, Colorado 80112
1 November 2005

Financial Management

MASTER COOPERATIVE AGREEMENT PROCEDURES
(Effective 1 November 2005)

By Order of the Governor:

//ORIGINAL SIGNED//

MASON C. WHITNEY, Maj. Gen., COANG
The Adjutant General

History:
This is the original Issue of this Regulation

Supplementation:
Supplementation of this regulation is prohibited

Purpose:
This regulation delineates the Department's policies and procedures implementing the Master Cooperative Agreement in accordance with NGR 5-1.

Applicability:
This regulation applies to all Colorado Army National Guard (COARNG) and Colorado Air National Guard (COANG) Master Cooperative Agreement Appendices.

Proponent:

The proponent for this regulation is the DMVA Administrator for Cooperative Agreements.

Suggested Improvements:
Users are invited to send comments and suggested improvements to CODAG/RM 6848 S. Revere Parkway, Centennial, CO 80112-6703.

Distribution and Restrictions:

DMVA, USPFO, COARNG and COANG

This regulation supersedes all Colorado National Guard guidance on Cooperative Agreements dated prior to 1 November 2005.

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This regulation supersedes all previous instructions/policies on COARNG MCA Modifications

DEFINITIONS: All terms and definitions contained in the Glossary of NGR 5-1/ANGI 63-101 apply except:

1. **Program Manager:** A federal civil service employee (Title 32 or Title 5) of the Colorado Army or Air National Guard who is appointed by the United States Property and Fiscal Officer (USP&FO) for Colorado and The Adjutant General (TAG) of Colorado to be accountable, at the state level, for the federal funds provided to the Department of Military and Veterans Affairs (DMVA) through one or more appendices of the Master Cooperative Agreement.

2. **Activity Manger(ARNG)/Resource Advisor(ANG)/Appendix Manager**: A federal civil service employee (Title 32 or Title 5) of the Colorado Army or Air National Guard who is appointed by the Program Manager and approved by United States Property and Fiscal Officer (USP&FO) for Colorado to be responsible for managing the federal funds provided to the Department of Military and Veterans Affairs (DMVA) through one or more appendices of the Master Cooperative Agreement.

3. **MCA:** Master Cooperative Agreement as defined in NGR 5-1/ANGI 63-101 and applicable federal statutes and regulations. The MCA consists of two sections. Section 1 contains Article I through Article XII which are the general Terms and Conditions applicable to all Appendices. Section 2 contains all the Army Guard and Air Guard Appendices applicable to Colorado.

4. **MCA Modification (MOD):** A document approved by the USP&FO and the TAG that changes:
    a. The terms and conditions of the Master Cooperative Agreement or one of its Appendices
    b. The amount of federal funds provided the state under one of the Appendices

5. **AMSCO:** ARNG accounting code.

6. **GBL:** Grant Budget Line – State accounting element which provides sub-accounts into which federal spending authority is loaded by specific expenditure type (eg. Utilities, 75%/25% Personnel Costs, 100% Personnel Costs, etc). MODs provide the details as to what spending authority amounts to load into which GBL.

7. **GOR:** Grants Officer Representative – A federal civil service employee (Title 32 or Title 5) of the Colorado Army or Air National Guard who is appointed by the United States Property and Fiscal Officer (USP&FO) for Colorado to represent the USP&FO on all matters dealing with the MCA. The GOR CANNOT sign MODs on behalf of the USP&FO.

CHAPTER 1
COARNG MCA Modifications Procedures

SECTION 1:
General Requirements and Flow Chart

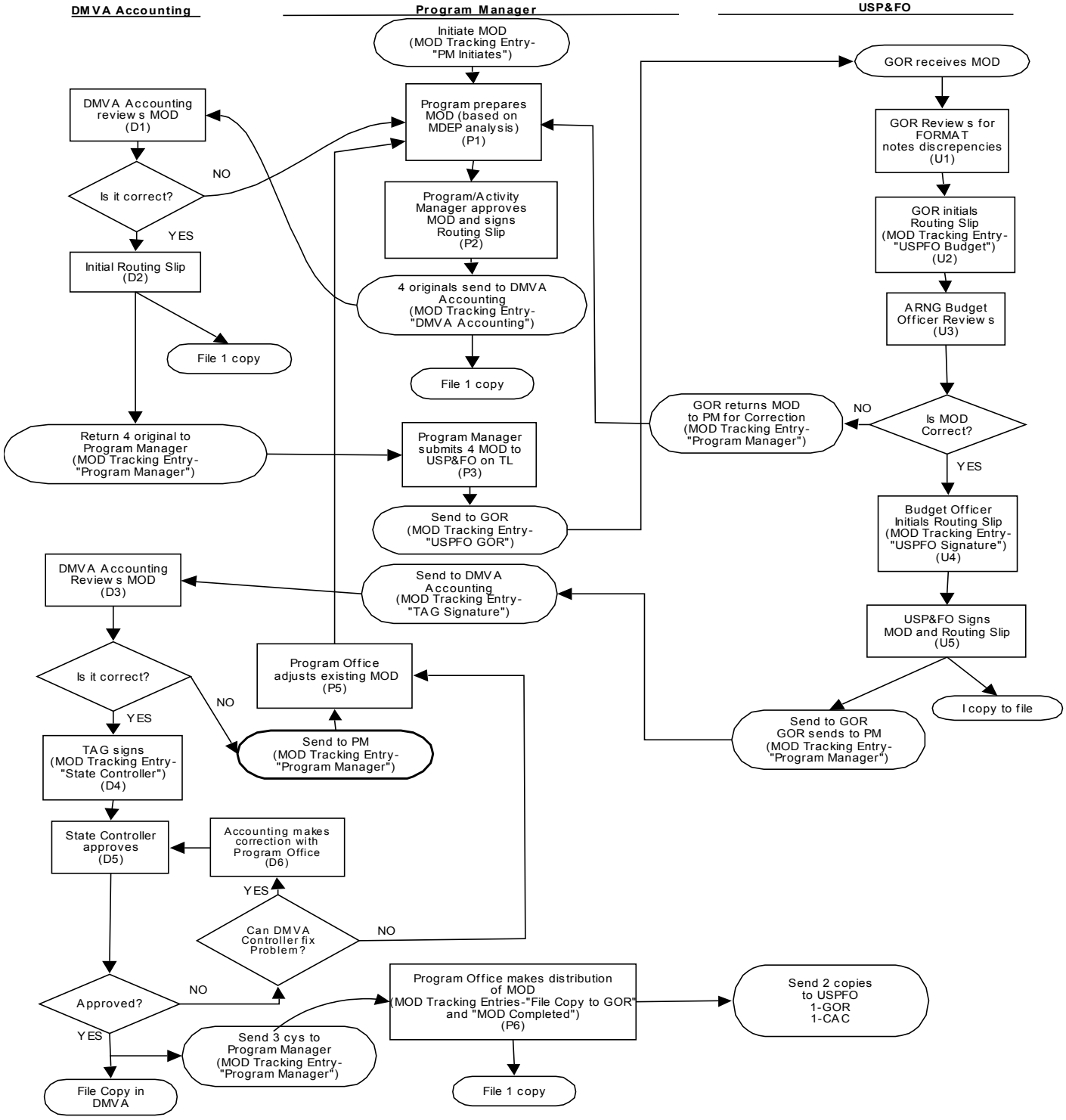
GENERAL: Para 2-6 NGR 5-1 provides guidance for Master Cooperative Agreement Modifications. This regulation specifies the process to be used in Colorado for Master Cooperative Agreement Modifications.

MODIFICATIONS: The MCA must be modified any time one of the following occurs:

1. The amount of Federal Funds for the Appendix increases.
2. The amount of Federal Funds for the Appendix decreases.
3. The Federal Funds are moved between State Sharing and State non-Sharing lines (e.g. move funds from a 100% Federal line to 75% Federal/25% State line)
4. Any time the Terms and Conditions of the MCA or any of its Appendices are changed.

NOTE: Moving funds within the same State Sharing or State non-Sharing lines requires a memorandum from the Program Manager/Activity Manager to the DMVA Controller, not a Modification.

Cooperative Agreement ARNG MOD Process (Rev 11-01-05)



MCA MODIFICATION (MOD) TRACKING SYSTEM

INSTRUCTIONS:

This document provides a step by step instruction on how to use the MCA MOD Tracking System. This system is web based and accessible from any computer that has access to the web.

The URL is: https://www.dmva.state.co.us/mca/index.php?

2. This is a password protected system. The log-in: username: mcamod
password: tr4ck

3. Once you are in the system you will see the following display:

MCA Modification Tracking System

Mod Number	Current Department	Date In
A02-04-003	Program Manager	2004-02-10

New Mod Number [*Enter Mod Number here*] [ADD button]

Top of Form 1

Example A01-04-001 (Appendix-FY-Sequence Number)

Bottom of Form 1

a. There are 3 columns: **Mod Number, Current Department, Date In.** The display is initially sorted by **Mod Number**. By clicking on the Column heading you can re-sort by category (ie. **Mod Number, Current Department, Date In**).

b. The **Mod Number** structure is: Axx - "A"+ Appendix Number (eg. A01)
xx - Federal Fiscal Year (eg. 04)
xxx - Sequence Number (eg. 001)

c. **Current Department** column shows the department/location where the MOD is currently located. **Date In** column shows the date it was transferred to the current department/location from the previous department/location.

d. To initiate a new MOD, the Program Manager logs into the system. Then in the box next to "New Mod Number" the PM enters a new MOD number (see b. above) and clicks the [ADD button].

e. To move the MOD to the next department /location click on the MOD number.

4. Once you click on the MOD number the following screen comes up.

MCA Modification Tracking System

Editing Mod Number: **A02-04-003** Created **2004-02-10**

Department	Date In	Date Out	Comments
PM Initiates	2004-02-10	2004-02-10	MOD 3 in to State Controller
DMVA Accounting	2004-02-10	2004-02-10	
Program Manager	2004-02-10		

Top of Form 1

Comments
Mod Sent to [STAMP button]

Bottom of Form 1

Back to MCA Mod List.

---

1. To move the MOD to the next department, go to the "MOD Sent to" drop box and select the department/location by clicking on the "down arrow" button, then click on the appropriate department/location (eg. DMVA Accounting).

2. Write in the "Comments" box any text message you want to send along to the next department/location (eg. MOD 3 sent to State Controller).

3. Last step is to click the [STAMP button].

4. Once the [STAMP button] has been clicked the current date will be entered in the "Date Out" column of the current location and the "Date In" column of the receiving location. NOTE: ONCE THIS HAPPENS IT CAN NOT BE CHANGED.

5. NOTE: IF FOR SOME REASON YOU SELECTED THE WRONG NEXT LOCATION. GO BACK TO SELECT LOCATION – SELECT THE CORRECT LOCATION – CLICK ON THE [STAMP button]. This will not erase the previous operation but will get it to the correct location on the system.

If you have questions about this procedure please contact DMVA Resource Manager

For any problems with the system please Contact: DMVA IT Section

SECTION 2
DMVA Accounting Procedures
NOTE: Insure you use MOD Tracking System

1. DMVA Accounting reviews MOD (Step D1)

a. Print the Grant Budget Line Inquiry (GBLI) screens for each GBL on COFRS.
b. Add expenses and encumbrances for each GBL line.
c. Look at the new MOD's allotment amount for each GBL to see if allotment covers expenses and encumbrances already incurred (the minimum funding for each GBL.)
d. Review the additional funding to confirm the amount covers any unpaid bills being held.

```
ACTION: R  SCREEN: GBLI USERID: $ZX15                    07/23/03   03:01:47 PM
                   *** GRANT BUDGET LINE INQUIRY ***
KEY IS AGENCY, GRANT NUMBER, GRANT BUDGET LINE
01-
           AGENCY: OAA                      GRANT NUMBER: D300
    GRANT BUD LINE: D341                           STATUS: O
     OBJ LEVEL IND: N                     AVAIL FUNDS EDIT: Y
       DESCRIPTION: MUNICIPAL/ENGINEERG SVC 75/25
     CURR BDGT AMT:       60,103.00
     ORIG BDGT AMT:            0.00      ALLOTTED AMT:       60,103.00
    ENCUMBERED AMT:            0.00      EXPENDED AMT:        7,762.47
      EXPENSED AMT:        7,762.47  GRANT CHARGES AMT:           0.00
02-
           AGENCY: OAA                      GRANT NUMBER: D300
    GRANT BUD LINE: D342                           STATUS: O
     OBJ LEVEL IND: N                     AVAIL FUNDS EDIT: Y
       DESCRIPTION: UTILITIES 75/25
     CURR BDGT AMT:      236,000.00
     ORIG BDGT AMT:            0.00      ALLOTTED AMT:      236,000.00
    ENCUMBERED AMT:            0.00      EXPENDED AMT:      108,745.20
      EXPENSED AMT:      108,745.20  GRANT CHARGES AMT:           0.00
```

```
ACTION: R  SCREEN: GBLI USERID: $ZX15                    07/23/03   03:01:51 PM
                   *** GRANT BUDGET LINE INQUIRY ***
KEY IS AGENCY, GRANT NUMBER, GRANT BUDGET LINE
01-
           AGENCY: OAA                      GRANT NUMBER: D300
    GRANT BUD LINE: D343                           STATUS: O
     OBJ LEVEL IND: N                     AVAIL FUNDS EDIT: Y
       DESCRIPTION: PHYSICAL SECURITY 75/25
     CURR BDGT AMT:       80,000.00
     ORIG BDGT AMT:            0.00      ALLOTTED AMT:       80,000.00
    ENCUMBERED AMT:            0.00      EXPENDED AMT:       26,372.62
      EXPENSED AMT:       26,372.62  GRANT CHARGES AMT:           0.00
02-
           AGENCY: OAA                      GRANT NUMBER: D300
    GRANT BUD LINE: D344                           STATUS: O
     OBJ LEVEL IND: N                     AVAIL FUNDS EDIT: Y
       DESCRIPTION: MINOR CONSTRUCTION, SRM 75/25
     CURR BDGT AMT:      168,933.00
     ORIG BDGT AMT:            0.00      ALLOTTED AMT:      168,933.00
    ENCUMBERED AMT:        5,281.80      EXPENDED AMT:      126,811.42
      EXPENSED AMT:      126,811.42  GRANT CHARGES AMT:           0.00
```

Attachment 1
Cooperative Agreement Modification

COOPERATIVE AGREEMENT MODIFICATION

AGREEMENT NO.	**DAHA 05 04 2 1001**	Page 1 of 1	
MODIFICATION NO.	**P 005 FFY 2004**		
ISSUED BY NATIONAL GUARD BUREAU		ISSUED TO THE STATE OF COLORADO	

	A. This modification is issued pursuant to 31 U.S.C. Section 6301-6308 & Article VII, Section 702 of the Basic Agreement. The modification is described in the accompanying Attachment.						
	B. This modification reflects wording / Administrative changes. Wording changes must be forwarded to NGB for approval.						
XX	C. This modification, pursuant to FY04 Federal AFP of	$4,972,700.00	is to modify section 207, "Funding limitation" subject to the availability of funds, as follows:				
	1) The allotment dollar amount of this cooperative agreement Appendix is hereby changed from				**$3,066,404.33**	**to**	**$4,991,533.33**
	2) Section 207. Funding Limitation.						
	a. Funding	**Allotment**		**AFP**			
	Federal Share (100%)	$4,680,200.00		$4,759,200.00	**		
	Federal Share (75%)	$173,500.00		$173,500.00			
	Federal Share (50%)	$40,000.00		$40,000.00			
	Federal Total:	**$4,893,700.00**		**$4,972,700.00**			
	State Share (50%)	$40,000.00		$40,000.00			
	State Share (25%)	$57,833.33		$57,833.33			
	State Share	**$97,833.33**		**$97,833.33**			
	Grand Total:	**$4,991,533.33**		**$5,070,533.33**			
	b. In-Kind Assistance.						
	** The total number for the 100% federal contribution includes in-kind assistance.		$921,674.00	for allotment and	$921,674.00		for AFP of
	3) These changes are hereby incorporated into this cooperative agreement. The details for this change are included in Attachment No. 1 to this modification. The dollar amount for this new change is identified on the attachment to this modification.						

EXECUTION

Except as provided herein, all terms and conditions of the Agreement, as heretofore changed, remain unchanged in full force and effect.

IN WITNESS WHEREOF, the parties by their authorized representaitves, execute this Modification to Appendix 1.

THE STATE OF COLORADO	NATIONAL GUARD BUREAU:
BY:	BY:
_____	_____
MASON C. WHITNEY	MADONNA M. NUCE
MAJGEN, COANG	COL, COARNG
Adjutant General	USPFO for Colorado

2. Initial & Date Routing Slip (Step D2): Make a copy of the routing slip and MOD for the file

FAX TO: Carol Mentone [redacted] **Pls initial approval and FAX back to** [redacted].

COOPERATIVE AGREEMENT/MOD ROUTING CHECKLIST
(FEDERAL side of the house !!)
To be used as a cover sheet for all initial MCA appendices and modifications.

1. **Authority** initiating this document:: [redacted]

   Date document initiated: **1 October 2003**

   A. Cooperative Agreement & Appendix #: W912-LC-2-10xx ← Replace xx with appendix number (eg -1001, -1021

   B. Modification Number (if applicable): **P 001 FFY 2004**
   C. Modification **Effective** Date: **1 October 2003**

In order to: (a) Verify funds are available for transfer, (b) Avoid duplication of reviews and signatures, and (c) improve tracking and distribution of documents. The initiating Authority will route all MODs as follows:

Name/Initials: _____ Date: ___

2. Preliminary review by:

   A. **DMA Finance Office:** _____ ← DMVA Accounting Initials here

   B. **FED Agreements Coordinator:** _____

   C. **ANG/ARNG Budget Officer** _____

3. USPFO signature cleared: _____

4. Packet sent to DMA Budget Office: _____

5. TAG signature cleared: _____

6. DMA Budget Office sends packet **to COARNG [redacted] ACT MGR:** _____

7. Distribution by COARNG FAC ACT MGR to applicable state, federal & NGB offices: _____

8. **DMA Budget Officer: Please return 4 signed originals to the COARNG [redacted] Appendix [redacted] Activity Manager once properly approved by the TAG and USP&FO.**

3. DMVA Accounting Final Review of MOD (Step D3)

a. Print the Grant Budget Line Inquiry (GBLI) screens for each GBL on COFRS.
b. Add expenses and encumbrances for each GBL line.
c. Look at the new MOD's allotment amount for each GBL to see if allotment covers expenses and encumbrances already incurred (the minimum funding for each GBL.)
d. Review the additional funding to confirm the amount covers any unpaid bills being held.

```
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KEY IS AGENCY, GRANT NUMBER, GRANT BUDGET LINE
01-
            AGENCY: OAA                      GRANT NUMBER: D300
     GRANT BUD LINE: D341                           STATUS: O
      OBJ LEVEL IND: N                     AVAIL FUNDS EDIT: Y
        DESCRIPTION: MUNICIPAL/ENGINEERG SVC 75/25
      CURR BDGT AMT:       60,103.00
      ORIG BDGT AMT:            0.00       ALLOTTED AMT:       60,103.00
     ENCUMBERED AMT:            0.00       EXPENDED AMT:        7,762.47
       EXPENSED AMT:        7,762.47   GRANT CHARGES AMT:           0.00
02-
            AGENCY: OAA                      GRANT NUMBER: D300
     GRANT BUD LINE: D342                           STATUS: O
      OBJ LEVEL IND: N                     AVAIL FUNDS EDIT: Y
        DESCRIPTION: UTILITIES 75/25
      CURR BDGT AMT:      236,000.00
      ORIG BDGT AMT:            0.00       ALLOTTED AMT:      236,000.00
     ENCUMBERED AMT:            0.00       EXPENDED AMT:      108,745.20
       EXPENSED AMT:      108,745.20   GRANT CHARGES AMT:           0.00
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       EXPENSED AMT:       26,372.62   GRANT CHARGES AMT:           0.00
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            AGENCY: OAA                      GRANT NUMBER: D300
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      ORIG BDGT AMT:            0.00       ALLOTTED AMT:      168,933.00
     ENCUMBERED AMT:        5,281.80       EXPENDED AMT:      126,811.42
       EXPENSED AMT:      126,811.42   GRANT CHARGES AMT:           0.00
```

4. TAG signs MOD (Step D4)

5. DMVA Accounting submits MOD to State Controller for Approval (Step D5):
Submit approved/signed MOD to DMVA's field controller for approval.

6. DMVA makes corrections per State Controllers Office if necessary (Step D6)

SECTION 3
COARNG Program/Activity Manager Process
NOTE: Insure you use MOD Tracking System

1. Program /Activity Manager Prepares MOD (Step P1):

Modification Document (MOD) Preparation Checklist
Appendix Manager

a. Determine all increases and decreases that pertain to the appendix. This may include Funding Authorization Targets (FAT), requirements in other appendices, Total Obligation Authority (TOA) given by other program managers, MIPRs, etc.

b. Identify requirements in the various programs within the appendix. Prioritize these requirements, and distribute the funds between the AMSCOs according, keeping in mind any fund movement restrictions imposed by higher headquarters and the chain of command.

c. Print out the Grant Budget Line Inquiry (GBLI) screens for each GBL on COFRS. Add the expenses and encumberances for each GBL line. This is the MINIMUM funding level for each GBL, unless you intend to cancel encumberances.

d. Start by preparing the worksheet that supports the MOD cover sheet. Begin by changing the appropriate data in the header such as date prepared and MOD number (gray shaded area)

e. As necessary, insert (or delete) rows to match the needs of your appendix. Understand that any insertions or deletions will change calculations, effecting several cells. Make all necessary changes of appropriate data. If you have questions with this step, please contact MAJ Fehringer in the Facilities Office.

f. Show the funded amount changes determined in step 1. Show these at the bottom of the MOD worksheets in the light green shaded area. These changes automatically total.

g. Transfer the ending balances from the previous MOD to the beginning balance columns on your worksheet in the light purple shaded area. If this is the initial MOD for the fiscal year, place zeros in the beginning balance column. The numbers in the yellow will automatically calculate.

h. Using the requirements determined in step 2 and the minimum balances determined in step 3, identify the changes needed for this MOD. Show these changes in the column

named “THIS CHANGE” in the light purple shaded area. These changes automatically total. These changes MUST equal the total determined in step e.

i. Identify why the changes in this MOD are necessary in the darker purple shaded area below the “TOTAL FUNDS” area.

j. If your MDEP funds are used in more than one appendix, it is recommended that you show how much funding is in each appendix to help the USPFO Budget Officer in determining if funding is available to support the changes requested in your MOD. These are shown in the cyan colored area towards the bottom of the MOD.

k. Validate that fund movements have not violated any fences, fund movement restrictions, or minimum/maximum funding levels required by your appendix regulations or guidance given by NGB or other higher headquarters.

l. Begin working on the MOD cover sheet (signature sheet). The numbers from the worksheet should automatically populate the appropriate areas of the cover sheet.. Change the header information (date prepared, MOD number, etc.). These areas are highlighted in cyan blue.

m. Prepare the Routing Sheet by changing the header information (MOD number, date prepared). The areas that should be changed are highlighted in cyan blue.

n. Print one copy of the Routing sheet, and five copies of both the MOD cover sheet and MOD worksheet.

o. Sign the MOD routing sheet. Retain one copy of the MOD cover sheet and worksheet for your records as a suspense.

p. Email copies of the MOD worksheet and the cover sheet to the GOR and Budget Officer at USPFO. Coordinate with USPFO for a walk through of the MOD.

q. Take the four original copies to the Department Controller. If known, inform the controller of the date and time of the walk through with USPFO.

r. When the MOD has been initialed off by the Department Controller, walk the MOD through USPFO, beginning with the GOR, then the Budget Officer, and finally tothe USPFO for signature.

s. Return the signed copies back to the State Controller for signature by the Adjutant General.

t. Once the MOD is signed , ensure the State Controller, USPFO, and yourself have signed original copies.

Attachment 1
Cooperative Agreement Modification

COOPERATIVE AGREEMENT MODIFICATION

AGREEMENT NO.		**DAHA 05 04 2 1001**				Page 1 of 1				
MODIFICATION NO.		**P 005 FFY 2004**								
ISSUED BY NATIONAL GUARD BUREAU						ISSUED TO THE STATE OF COLORADO				
	A. This modification is issued pursuant to 31 U.S.C. Section 6301-6308 & Article VII, Section 702 of the Basic Agreement. The modification is described in the accompanying Attachment.									
	B. This modification reflects wording / Administrative changes. Wording changes must be forwarded to NGB for approval.									
XX	C. This modification, pursuant to FY04 Federal AFP of				$4,972,700.00	is to modify section 207, "Funding limitation" subject to the availability				
	of funds, as follows:									
	1) The allotment dollar amount of this cooperative agreement Appendix is hereby changed from							**$3,066,404.33**	**to**	**$4,991,533.33**
	2) Section 207. Funding Limitation.									
		a. Funding			**Allotment**		**AFP**			
		Federal Share (100%)			$4,680,200.00		$4,759,200.00	**		
		Federal Share (75%)			$173,500.00		$173,500.00			
		Federal Share (50%)			$40,000.00		$40,000.00			
		Federal Total:			**$4,893,700.00**		**$4,972,700.00**			
		State Share (50%)			$40,000.00		$40,000.00			
		State Share (25%)			$57,833.33		$57,833.33			
		State Share			**$97,833.33**		**$97,833.33**			
		Grand Total:			**$4,991,533.33**		**$5,070,533.33**			
		b. In-Kind Assistance.								
		** The total number for the 100% federal contribution includes				$921,674.00	for allotment and	$921,674.00		for AFP of
		in-kind assistance.								
	3) These changes are hereby incorporated into this cooperative agreement. The details for this change are included in Attachment No. 1 to this modification. The dollar amount for this new change is identified on the attachment to this modification.									
					EXECUTION					
	Except as provided herein, all terms and conditions of the Agreement, as heretofore changed, remain unchanged in full force and effect.									
	IN WITNESS WHEREOF, the parties by their authorized representaitves, execute this Modification to Appendix 1.									
	THE STATE OF COLORADO					NATIONAL GUARD BUREAU:				
	BY:					BY:				
		MASON C. WHITNEY					MADONNA M. NUCE			
		MAJGEN, COANG					COL, COARNG			
		Adjutant General					USPFO for Colorado			

Attachment 2
Cooperative Agreement Modification Worksheet

DATE: 19 October 2005	**SUBJECT:**	MODIFICATION P0001 TO W912-LC-2-1000				
TO: NGB-ARI (LTC Nord)	**FROM:**	CO-CFMO-RM (MAJ FEHRINGER)				
					AFP	
AMSCO - Account Description	**Percentage**	**GBL**		**PREVIOUS BALANCE**	**THIS CHANGE**	**REVISED BALANCE**
		State Funds				
					AFP	
				BALANCE	**THIS CHANGE**	**BALANCE**
Physical Security						
131G75.B0 - Physical Security Equipment - Barriers	25%	D631		$0.00	$5,000.00	$5,000.00
131G75.H0 - Physical Security Equipment & Sensors - Other	25%	D632		$0.00	$3,333.33	$3,333.33
131G75.J0 - Physical Security Site Improvements	25%	D633		$0.00	$1,666.67	$1,666.67
Base Operations Support (BOS)						
131G79.J1 - Water Services	25%	D601		$0.00	$333.33	$333.33
131G79.J2 - Waste Water Services	25%	D602		$0.00	$66.67	$66.67
131G79.J3 - Electric Services	25%	D603		$0.00	$1,000.00	$1,000.00
131G79.J5 - Gas Services	25%	D604		$0.00	$166.67	$166.67
131G79.M1 - Refuse Handling Operations	25%	D605		$0.00	$0.00	$0.00
131G79.M2 - Indoor Pest Control	25%	D606		$0.00	$0.00	$0.00
131G79.M3 - Outdoor Pest Control	25%	D607		$0.00	$0.00	$0.00
131G79.M4 - Custodial	25%	D608		$0.00	$0.00	$0.00
131G79.MC - Improved Ground Maintenance	25%	D609		$0.00	$0.00	$0.00
131G79.MD - Unimproved Ground Maintenance	25%	D610		$0.00	$0.00	$0.00
131G79.N1 - CPP	25%	D697		$0.00	$233.33	$233.33
131G79.P0 - Fire & Emergency Response Services	25%	D618		$0.00	$0.00	$0.00
131G79.Q1 - Project Planning and Management	25%	D616		$0.00	$0.00	$0.00
131G79.Q2 - Supervision, Inspection & Administration (SIOH)	25%	D617		$0.00	$0.00	$0.00
Sustainment, Restoration and Modernization (SRM)						
132G76.L1 - Restoration - Active Facilities	25%	D620		$0.00	$0.00	$0.00
132G76.L5 - Modernization - Active Facilities	25%	D621		$0.00	$0.00	$0.00
132G76.L6 - Modernization (Smaller Projects) - Active Facilities	25%	D622		$0.00	$0.00	$0.00
132G76.N1 - Restoration & Modernization - Planning & Design	25%	D623		$0.00	$0.00	$0.00
132G76.N2 - Restoration & Modernization - Supervision, Inspection and Administration - (SIOH)	25%	D624		$0.00	$0.00	$0.00
132G78.11 - Sustainment - Paved Surface Areas	25%	D640		$0.00	$0.00	$0.00
132G78.12 - Sustainment - Unpaved Surfaced Areas	25%	D641		$0.00	$0.00	$0.00
132G78.B1 - Sustainment - Training & Operations Facilities	25%	D644		$0.00	$0.00	$0.00
132G78.E1 - Sustainment - Administrative Facilities (Includes IT Facilities)	25%	D464		$0.00	$0.00	$0.00
132G78.J1 - Sustainment - Planning & Design	25%	D626		$0.00	$0.00	$0.00
132G78.J2 - Sustainment - Supervision, Inspection and Admininstration (SIOH)	25%	D627		$0.00	$0.00	$0.00
132G78.V1 - Sustainment - Improved Grounds, Fencing and Walls	25%	D635		$0.00	$0.00	$0.00
132G78.V2 - Sustainment - Unimproved Grounds, Fencing and Walls	25%	D636		$0.00	$0.00	$0.00
132G78.B1 - Sustainment - Training & Operations Facilities	50%	D642		$0.00	$0.00	$0.00
State Funds Total				**$0.00**	**$11,800.00**	**$11,800.00**
This mod is needed to bring in initial AFP and allotment						
					AFP	
MDEP ROLL UP				**PREVIOUS BALANCE**	**THIS CHANGE**	**REVISED BALANCE**
QRPA-1U0				$0.00	$980,600.00	$980,600.00
QDPW - 1W0				$0.00	$96,900.00	$96,900.00
QPSM - 1Q0				$0.00	$100,000.00	$100,000.00
QMIS - 1E0				$0.00	$0.00	$0.00
QLOG				$0.00	$0.00	$0.00
SATFA				$0.00	$0.00	$0.00
FEDERAL TOTAL				**$0.00**	**$1,177,500.00**	**$1,177,500.00**
STATE MATCHING				**$0.00**	**$11,800.00**	**$11,800.00**
AGREEMENT TOTAL				**$0.00**	**$1,189,300.00**	**$1,189,300.00**
					AFP	
QRPA Allotment					$980,600.00	
QDPW Allotment					$96,900.00	
QPSM Allotment					$100,000.00	
QMIS Allotment					$0.00	
Net Change					**$1,177,500.00**	
MOD Balances				**AFP**		
Apx 1 - MOD 1 - QRPA				$980,600.00		
Apx 1 - MOD 1 - QDPW				$96,900.00		
Apx 1 - MOD 1 - QPSM				$100,000.00		
Apx 1 - MOD 1 - QMIS				$0.00		
Appx 3 - MOD 1 (QPSM)				$967,600.00		
Appx 4 - MOD 1 (QPSM)				$174,700.00		
Appx 9 - MOD 1 (QDPW)				$89,300.00		
Total - QRPA				**$980,600.00**		
Total - QDPW				**$186,200.00**		
Total - QPSM				**$1,242,300.00**		
Total - QMIS				**$0.00**		

Attachment 3
Grant Budget Line Inquiry Screen (GBLI Example)

```
ACTION: R  SCREEN: GBLI USERID: $ZX15                    07/23/03   03:01:47 PM
                   *** GRANT BUDGET LINE INQUIRY ***
KEY IS AGENCY, GRANT NUMBER, GRANT BUDGET LINE
01-
           AGENCY: OAA                      GRANT NUMBER: D300
    GRANT BUD LINE: D341                           STATUS: O
     OBJ LEVEL IND: N                     AVAIL FUNDS EDIT: Y
       DESCRIPTION: MUNICIPAL/ENGINEERG SVC 75/25
     CURR BDGT AMT:       60,103.00
     ORIG BDGT AMT:            0.00      ALLOTTED AMT:       60,103.00
    ENCUMBERED AMT:            0.00      EXPENDED AMT:        7,762.47
      EXPENSED AMT:        7,762.47  GRANT CHARGES AMT:           0.00
02-
           AGENCY: OAA                      GRANT NUMBER: D300
    GRANT BUD LINE: D342                           STATUS: O
     OBJ LEVEL IND: N                     AVAIL FUNDS EDIT: Y
       DESCRIPTION: UTILITIES 75/25
     CURR BDGT AMT:      236,000.00
     ORIG BDGT AMT:            0.00      ALLOTTED AMT:      236,000.00
    ENCUMBERED AMT:            0.00      EXPENDED AMT:      108,745.20
      EXPENSED AMT:      108,745.20  GRANT CHARGES AMT:           0.00


ACTION: R  SCREEN: GBLI USERID: $ZX15                    07/23/03   03:01:51 PM
                   *** GRANT BUDGET LINE INQUIRY ***
KEY IS AGENCY, GRANT NUMBER, GRANT BUDGET LINE
01-
           AGENCY: OAA                      GRANT NUMBER: D300
    GRANT BUD LINE: D343                           STATUS: O
     OBJ LEVEL IND: N                     AVAIL FUNDS EDIT: Y
       DESCRIPTION: PHYSICAL SECURITY 75/25
     CURR BDGT AMT:       80,000.00
     ORIG BDGT AMT:            0.00      ALLOTTED AMT:       80,000.00
    ENCUMBERED AMT:            0.00      EXPENDED AMT:       26,372.62
      EXPENSED AMT:       26,372.62  GRANT CHARGES AMT:           0.00
02-
           AGENCY: OAA                      GRANT NUMBER: D300
    GRANT BUD LINE: D344                           STATUS: O
     OBJ LEVEL IND: N                     AVAIL FUNDS EDIT: Y
       DESCRIPTION: MINOR CONSTRUCTION, SRM 75/25
     CURR BDGT AMT:      168,933.00
     ORIG BDGT AMT:            0.00      ALLOTTED AMT:      168,933.00
    ENCUMBERED AMT:        5,281.80      EXPENDED AMT:      126,811.42
      EXPENSED AMT:      126,811.42  GRANT CHARGES AMT:           0.00
```

2. Program/Activity Manager approves MOD (P2)

a. Program Manager signs Routing Slip
b. Sends Routing slip & 4 Original MODs to DMVA Accounting

FAX TO: Carol Mentone [redacted] **Pls initial approval and FAX back to [redacted].**

COOPERATIVE AGREEMENT/MOD ROUTING CHECKLIST
(FEDERAL side of the house !!)
To be used as a cover sheet for all initial MCA appendices and modifications.

1. **Authority** initiating this document:: ← Program/Activity Mgr Initials here [redacted]

Date document initiated: **1 October 2003**

A. Cooperative Agreement & Appendix #: W912-LC-2-10xx

B. Modification Number (if applicable): **P 001 FFY 2004**
C. Modification **Effective** Date: **1 October 2003**

In order to: (a) Verify funds are available for transfer, (b) Avoid duplication of reviews and signatures, and (c) improve tracking and distribution of documents. The initiating Authority will route all MODs as follows:

Name/Initials: _____ Date: ___

2. Preliminary review by:

A. **DMA Finance Office:** _____

B. **FED Agreements Coordinator:** _____

C. **ANG/ARNG Budget Officer** _____

3. USPFO signature cleared: _____

4. Packet sent to DMA Budget Office: _____

5. TAG signature cleared: _____

6. DMA Budget Office sends packet **to COARNG [redacted] ACT MGR:** _____

7. Distribution by COARNG FAC ACT MGR to applicable state, federal & NGB offices: _____

8. **DMA Budget Officer: Please return 4 signed originals to the COARNG [redacted] Appendix [redacted] Activity Manager once properly approved by the TAG and USP&FO.**

3. Program Manager submits MOD to USP&FO (Step P3):

Transmittal Letter for Advances Preparation Checklist

a. Gather all documents in addition to the Advance Request that need to go to USPFO. Collate each document by type.

Block 1 – Security Classification – Enter "UNCLAS" for all uses within the Cooperative Agreement.

Block 2 – Shipment No. – Enter the next sequential number for your office, such as "02-FMO-10-01" using the following format:

02 – Federal Fiscal Year
FMO – Originating Office
10 - Two-digit month
01 - Sequential number for that month

Block 3 – Title/File Identification – Enter the type of document(s) being transmitted. In this case, enter "MCA Modification Request(s)".

Block 4 – As of Date (YYYYMMDD) – Enter today's date as shown

Block 5 – Shipment Date – Enter today's date

Block 6 – Authority for Shipment – Enter "DFAS-IN Regulation 37-1, Chapter 3, paragraph 3-8".

Block 7 – Number of Records Transmitted – Enter the total number of records being transmitted.

Block 8 – Person to Contact – Enter your office's Point of Contact (POC)

Block 9 – Requirement Control Symbol – Leave Blank

Block 10 – Shipped From – Enter your office's mailing address

Block 11 – Shipped To – Enter the address for USPFO. Direct advance requests to the GOR. Example: (NOTE: Check the block requesting return receipt)

USPFO-Colorado
ATTN: COPFO – Grants Officer Representative (GOR)
660 South Aspen Street, MS 66
Buckley Air Force Base, Aurora, CO 80011-9551

Transmittal Letter for Advances Preparation Checklist (Continued)

Block 10a – Typed Name and Title of Sender – Enter your information

Block 11a. – Typed Name and Title of Receiver – Enter the recipient's name and title

Block 10b – Signature of Sender – Sign when completed

Block 11b – Signature of Receiver and Date – Leave Blank

Block 12 – Type of Media Transmitted – Check the block marked "Hard Copy"

Block 13 – Number of Boxes – Enter "0"

Block 14 – Number of Items – Enter "0"

Block 15 – Method of Shipment – Check the block marked "Courier"

Block 16 – Special Instructions – Normally left blank. Enter any other special **instructions you may have, such as date required.**

Block 17 – Type Component Used – Leave blank

Block 18 – Remarks – List by type the documents being transmitted. An example is:

1 – SF1034 – FY01 (01-33L)
2 – SF270 – FY03 (Apx 1 – Oct-Dec, Apx 4 – Oct-Dec)

b. Print four (4) copies of the DA Form 200. Sign all four in block 10b. and suspense one copy for your files. Send the remaining two with the listed documents to USPFO. Send one to the GOR

c. For an Example DA Form 200 see Attachment 1.

Attachment 1
DA Form 200 (Transmittal Record – TL) Sample

TRANSMITTAL RECORD For use of this form, see AR 25-50; the proponent agency is DCSPER	1. SECURITY CLASSIFICATION UNCLAS	2. SHIPMENT NO. 03-FMO-07-01
3. TITLE/FILE IDENTIFICATION Master Cooperative Agreement Modification	4. AS OF DATE *(YYYYMMDD)* 2003/07/01	5. SHIPMENT DATE *(YYYYMMDD)* 2003/07/01
6. AUTHORITY FOR SHIPMENT DFAS-IN Regulation 37-1. Chapter 3, paragraph 3-8	7. NUMBER OF RECORDS TRANSMITTED 2	
8. PERSON TO CONTACT *(Name and telephone)* MAJ Kevin Fehringer, 303-677-8928	9. REQUIREMENT CONTROL SYMBOL *(AR 335-15)*	
10. SHIPPED FROM Facilities & Engineering 6848 South Revere Parkway Englewood, CO 80112-6703	11. SHIPPED TO USPFO-Colorado ATTN: COPFO-Budget Officer 660 South Aspen Street, MS 66 Buckley Air Force Base, Aurora, CO 80011-9551 [X] RETURN RECEIPT REQUESTED *(When box is checked, sign below and return copy to sender.)*	
10a. TYPED NAME AND TITLE OF SENDER MAJ Kevin Fehringer, Resource Manager	11a. TYPED NAME AND TITLE OF RECEIVER SFC Gene Diekman, Staff Accountant	
10b. SIGNATURE OF SENDER	11b. SIGNATURE OF RECEIVER AND DATE	

12. TYPE OF MEDIA TRANSMITTED

X	HARD COPY		PUNCHED CARDS		CASSETTES		
	MICROFILM		PHOTO		FICHE		

13. NUMBER OF BOXES *(Packages)*	14. NUMBER OF ITEMS
0	0

15. METHOD OF SHIPMENT

X	COURIER		FIRST CLASS		PARCEL POST		
	EXPRESS MAIL		REGISTERED				

16. SPECIAL INSTRUCTIONS

17. TYPE COMPONENT USED *(For magnetically recorded data)*

18. REMARKS

1 - FY03 Apx 1 MOD - (MOD 4)
1 - FY02 Apx 3 MOD - (MOD 7)

DA FORM 200, SEP 1998 PREVIOUS EDITIONS ARE OBSOLETE USAPA V1.00

4. Program Office adjust existing MOD (Step P5):

Funds may be moved within the MOD between GBL lines if:

a. No funds are being added or withdrawn from the Cooperative Agreement

b. Funds are being moved within state appropriations, not between state appropriations.

NOTE: This procedure is accomplished with a simple memo to the department controller clearly identifying the fund moves that are being made. These moves need to be taken into account when the next MOD is being prepared.

5. Program Office makes final distribution

a. 2 Copies sent to USP&FO (1 – GOR, 1-Budget Officer)
b. 1 Copy filed in Program files

SECTION 4
USP&FO Budget Officer/Commercial Accounts Process
NOTE: Insure you use MOD Tracking System

1. GOR Reviews MOD (Step U1):

Review Checklist for MOD (USPFO GOR)

Modification Document (MOD) Preparation Checklist
Grants Officer Representative (GOR)

a. Review the MOD for content. If the MOD is for language changes to the Cooperative Agreement, additional signature blocks are required at the bottom of the Cover Sheet for additional reviews. Refer to NGR 5-1 and local subject matter experts for proper format (POC for DMVA is the Resource Manager/MCA Administrator)

b. Open the file for the applicable appendix and Fiscal Year. Verify that you have an signed copy of the previous MOD. If not, request a copy from the Appendix Manager.

c. Review the MOD for format. If the format is basically the same as the sample, no adjustments are necessary. Significant changes should be coordinated ahead of time to avoid delays in processing the MOD.

d. Review the section labeled "2) Section 207. Funding Limitation." Verify that the "Previous Balance" on this MOD matches the "New Balance" on the previous MOD.

e. Sign off on the Routing Sheet and pass the MOD on to the Budget Officer/Comptroller for their financial review.

f. When the approved, signed MOD comes back, place a copy in the Appendix file.

2. GOR initials Routing Slip (Step U2):

FAX TO: Carol Mentone [redacted] **Pls initial approval and FAX back to** [redacted].

COOPERATIVE AGREEMENT/MOD ROUTING CHECKLIST
(FEDERAL side of the house !!)
To be used as a cover sheet for all initial MCA appendices and modifications.

1. **Authority** initiating this document:: [redacted]

   Date document initiated: **1 October 2003**

   A. Cooperative Agreement & Appendix #: W912-LC-2-10xx

   B. Modification Number (if applicable): **P 001 FFY 2004**
   C. Modification **Effective** Date: **1 October 2003**

In order to: (a) Verify funds are available for transfer, (b) Avoid duplication of reviews and signatures, and (c) improve tracking and distribution of documents. The initiating Authority will route all MODs as follows:

Name/Initials: _____ Date: ____

2. Preliminary review by:

   A. **DMA Finance Office:** _____

   B. **FED Agreements Coordinator:** _____ ← GOR Initials here

   C. **ANG/ARNG Budget Officer** _____

3. USPFO signature cleared: _____

4. Packet sent to DMA Budget Office: _____

5. TAG signature cleared: _____

6. DMA Budget Office sends packet **to COARNG [redacted] ACT MGR:** _____

7. Distribution by COARNG FAC ACT MGR to applicable state, federal & NGB offices: _____

8. **DMA Budget Officer: Please return 4 signed originals to the COARNG [redacted] Appendix [redacted] Activity Manager once properly approved by the TAG and USP&FO.**

GOR Initials here

3. Budget Officer reviews MOD (Step U3):

Budget Officer review MOD per internal instructions. If there are problems Budget Officer returns MOD to GOR to return to Program Manager. If the MOD is correct:

a. Budget Officer signs TL block 11a & 11b
b. Budget Officer sends signed copy of TL to Program Manager

4. Budge Officer initials Routing Slip (Step U4):

FAX TO: Carol Mentone [redacted] **Pls initial approval and FAX back to** [redacted].

COOPERATIVE AGREEMENT/MOD ROUTING CHECKLIST
(FEDERAL side of the house !!)
To be used as a cover sheet for all initial MCA appendices and modifications.

1. **Authority** initiating this document:: [redacted]

   Date document initiated: **1 October 2003**

   A. Cooperative Agreement & Appendix #: W912-LC-2-10xx

   B. Modification Number (if applicable): **P 001 FFY 2004**
   C. Modification **Effective** Date: **1 October 2003**

In order to: (a) Verify funds are available for transfer, (b) Avoid duplication of reviews and signatures, and (c) improve tracking and distribution of documents. The initiating Authority will route all MODs as follows:

Name/Initials: _____ Date: ___

2. Preliminary review by:

   A. **DMA Finance Office:** _____

   B. **FED Agreements Coordinator:** _____

   C. **ANG/ARNG Budget Officer** _____ ← ANG/ARNG Budget Initials here

3. **USPFO signature cleared:** _____

4. Packet sent to DMA Budget Office: _____

5. TAG signature cleared: _____

6. DMA Budget Office sends packet **to COARNG** [redacted] **ACT MGR:** _____

7. Distribution by COARNG FAC ACT MGR to applicable state, federal & NGB offices: _____

8. **DMA Budget Officer: Please return 4 signed originals to the COARNG** [redacted] **Appendix** [redacted] **Activity Manager once properly approved by the TAG and USP&FO.**

5. USP&FO sign MOD and Routing Slip (Step U5)

FAX TO: Carol Mentone X78729 **Pls initial approval and FAX back to [redacted].**

COOPERATIVE AGREEMENT/MOD ROUTING CHECKLIST
(FEDERAL side of the house !!)
To be used as a cover sheet for all initial MCA appendices and modifications.

1. **Authority** initiating this document:: [redacted]

   Date document initiated: **1 October 2003**

   A. Cooperative Agreement & Appendix #: W912-LC-2-10xx

   B. Modification Number (if applicable): **P 001 FFY 2004**
   C. Modification **Effective** Date: **1 October 2003**

In order to: (a) Verify funds are available for transfer, (b) Avoid duplication of reviews and signatures, and (c) improve tracking and distribution of documents. The initiating Authority will route all MODs as follows:

Name/Initials: _____ Date: ____

2. Preliminary review by:

   A. **DMA Finance Office:** _____

   B. **FED Agreements Coordinator:** _____

   C. **ANG/ARNG Budget Officer** _____

3. USPFO signature cleared: _____ ← USPFO Initials here

4. Packet sent to DMA Budget Office: _____

5. TAG signature cleared: _____

6. DMA Budget Office sends packet **to COARNG [redacted] ACT MGR:** _____

7. Distribution by COARNG FAC ACT MGR to applicable state, federal & NGB offices: _____

8. **DMA Budget Officer: Please return 4 signed originals to the COARNG [redacted] Appendix [redacted] Activity Manager once properly approved by the TAG and USP&FO.**

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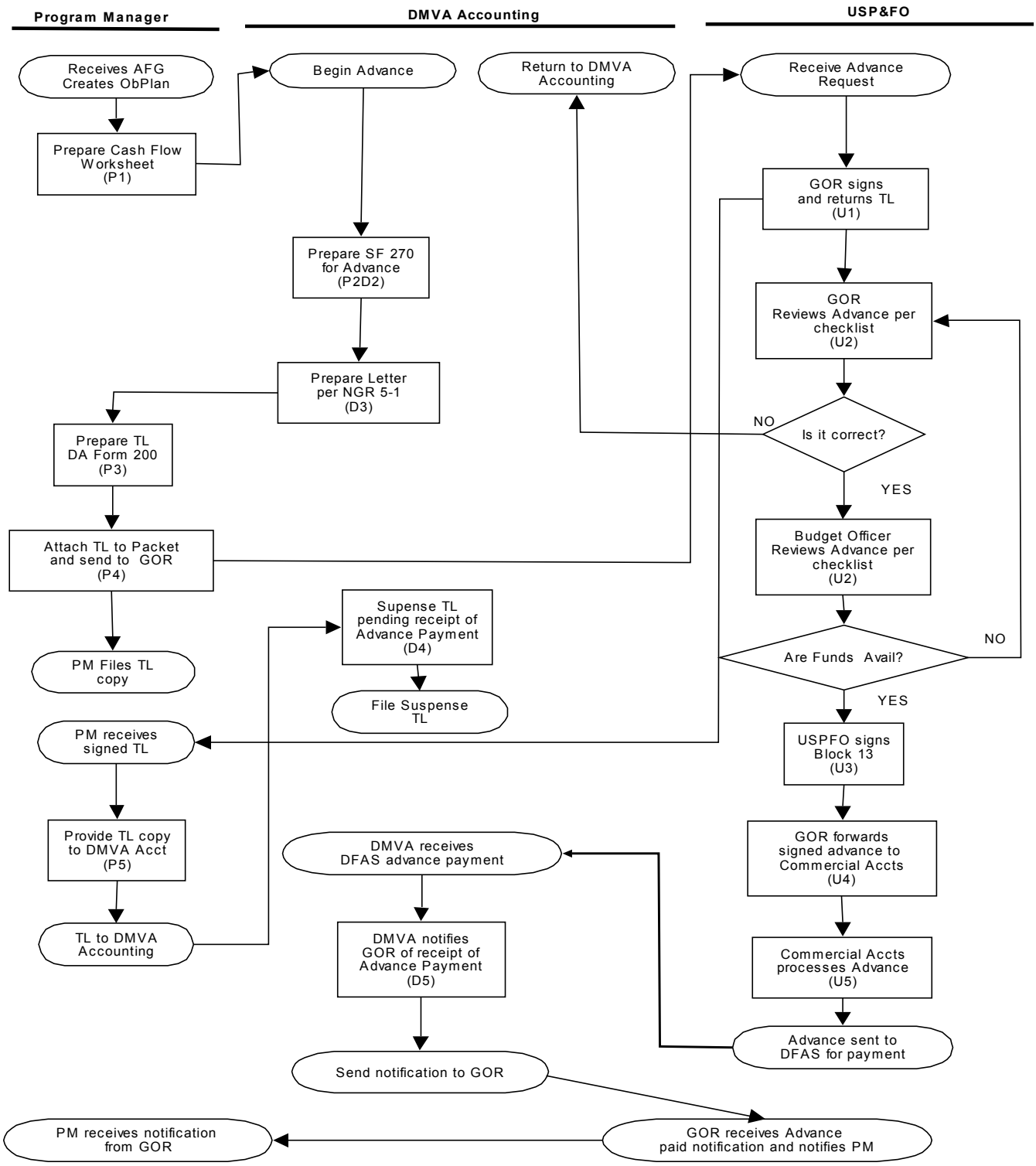
CHAPTER 2
COARNG MCA Advance Procedures

SECTION 1:
General Requirements and Flow Chart

GENERAL: Para 12-4 (b) NGR 5-1 provides for Advance Payments to states provided certain administrative requirements are met. This regulation specifies the process to be used in Colorado for Master Cooperative Agreement Advance Payments.

ADVANCE PAYMENT REQUESTS: Advance Payment Requests for each appendix will be made in September of each year for the next fiscal year. This constitutes a working capital advance of approximately 45 days.

COOPERATIVE AGREEMENT ARNG ADVANCES PROCESS (Rev 10-28-05)



SECTION 2
DMVA Accounting Procedures

1. Preparing SF 270 for ADVANCE (Step P2D2)

General: There is a separate advance form set up for each appendix which depends on the funding per the Initial Mod. Make sure you use the correct form for each Appendix.

Completion Instructions: SF 270 for ADVANCE (see Attachment 1)

BOX #

1a Make sure the 1a ADVANCE box is checked and not the REIMBURSEMENT box

1b Make sure box 1b PARTIAL is checked

2 Check box for CASH

4 DAHA # must match the appendix #

8 Change the dates to reflect the period covered by this advance

11(a) Program #

11a Total requested Year-to-Date of Request

11d Cash flow estimate - from appendix managers

11h Total previously requested (enter total received/requested to date)

11j Month split

Attachment 1
SF 270 ADVANCES

Computer-Generated Form

ADV-APX5-05-04

REQUEST FOR ADVANCE OR REIMBURSEMENT (See instructions on back)	OMB APPROVAL NO. 0348-0004	PAGE 1 OF 1 PAGES
	1. TYPE OF PAYMENT REQUESTED — a. "X" one or both boxes: ☑ ADVANCE ☐ REIMBURSEMENT; b. "X" the applicable box: ☐ FINAL ☑ PARTIAL	2. BASIS OF REQUEST: ☑ CASH ☐ ACCRUAL
3. FEDERAL SPONSORING AGENCY AND ORGANIZATIONAL ELEMENT TO WHICH THIS REPORT IS SUBMITTED: USPFO-CO	4. FEDERAL GRANT OR OTHER IDENTIFYING NUMBER ASSIGNED BY FEDERAL AGENCY: DAHA-05-05-2-1005	5. PARTIAL PAYMENT REQUEST NUMBER FOR THIS REQUEST: APX5-FY05-Adv-Jul-Sep
6. EMPLOYER IDENTIFICATION NUMBER	7. RECIPIENT'S ACCOUNT NUMBER OR IDENTIFYING NUMBER	8. PERIOD COVERED BY THIS REQUEST: FROM (month, day, year) July 1, 2005 — TO (month, day, year) September 30, 2005

9. RECIPIENT ORGANIZATION		10. PAYEE (Where check is to be sent if different than item 9)
Name:	Colorado Dept. of Military & Veterans Affairs	Name:
Number and Street:	6868 South Revere Parkway, #252	Number and Street:
City, State and ZIP Code:	Centennial, CO 80112-6703	City, State and ZIP Code:

11. COMPUTATION OF AMOUNT OF REIMBURSEMENTS/ADVANCES REQUESTED

PROGRAMS/FUNCTIONS/ACTIVITIES	(a) 1310MXCB	(b)	(c)	TOTAL
a. Total program outlays to date (As of date) 06/24/05	$0.00			$0.00
b. Less: Cumulative program income	$0.00			$0.00
c. Net program outlays (Line a minus line b)	$0.00			$0.00
d. Estimated net cash outlays for advance period	$266,100.00			$266,100.00
e. Total (Sum of lines c & d)	$266,100.00			$266,100.00
f. Non-Federal share of amount on line e	$0.00			$0.00
g. Federal share of amount on line e	$266,100.00			$266,100.00
h. Federal payments previously requested	$94,137.98			$94,137.98
i. Federal share now requested (Line g minus line h)	$171,962.02			$171,962.02
j. Advances required by month, when requested by Federal grantor agency for use in making prescheduled advances — 1st month				
2nd month		SUBMIT INVOICE IN ACCORDANCE		
3rd month		WITH AWARD INSTRUCTIONS		

12. ALTERNATE COMPUTATION FOR ADVANCES ONLY

a. Estimated Federal cash outlays that will be made during period covered by the advance	
b. Less: Estimated balance of Federal cash on hand as of beginning of advance period	
c. Amount requested (Line a minus line b)	

13. CERTIFICATION

I certify that to the best of my knowledge and belief the data on the reverse are correct and that all outlays were made in accordance with the grant conditions or other agreement and that payment is due and has not been previously requested.	SIGNATURE OR AUTHORIZED CERTIFYING OFFICIAL	DATE REQUEST SUBMITTED
	TYPED OR PRINTED NAME AND TITLE: COL Madonna Nuce, USP&FO	TELEPHONE (AREA CODE, NUMBER, EXTENSION): 720-847-8656

This space for agency use: 2152065 18-1005 131G9500 2540 MXCB ADV5V4131G9500 HV0745 S05073 8AZAA V4 $171,962.02

AUTHORIZED FOR LOCAL REPRODUCTION 6/24/2005 Jana Sanchez 1535

STANDARD FORM 270 (Rev. 7-97)
Prescribed by OMB Circulars A-102 and A-110

MEMORANDUM

COLORADO DEPARTMENT OF MILITARY AND VETERANS AFFAIRS

TO: USPFO for Colorado, [redacted]

FROM: Department of Military Affairs,
Controller, [redacted]

SUBJECT: Request for Advance Payment Approval
Colorado, **July 1,2003 - September 30,2003**

DATE: May 27, 2003

1. Request advance payment authority for Army National Guard's FY03 Cooperative Agreement **DAHA-05-03-2-10**[redacted] between the National Guard Bureau and State of Colorado.

2. This request is required by Colorado Revised Statue 24-30-202, subparagraph 3 which precludes the incurring of an obligation by the State of Colorado unless funds are available in the State Treasury in the form of an unencumbered balance to pay for the obligation. State of Colorado has insufficient funds to fully support the federal portion of this agreement.

3. State of Colorado agrees that all advance payments received under this agreement shall be used solely for the authorized services specified in the agreement. Further, the books and records of the State shall be made available, on request, for inspection by properly authorized representatives of the United States Property and Fiscal Officer; Chief, National Guard Bureau and the Comptroller General. The books and records are also subject to the review of the State Auditor.

4. Furthermore, State of Colorado agrees to minimize the time elapsing between the transfer of funds from the U.S. Treasury and their disbursement by the State.

5. Request Reimbursement Cycle of 60 days.

6. **In accordance with the attached documentation the proposed total advance payment for this agreement is $** [redacted]

7. Point of contact is [redacted]

Encl

COPY

Document: C:\Advance Letter.doc
Saved: 5/28/2003 4:05 PM
j

2. Preparing Advance Letter per NGR 5-1(Step D3):

a. Enter Quarter dates
b. Enter Date of Letter
c. Enter DAHA Number
d. Enter Advance Amount (from SF 270)
e. Controller Signs Letter
f. Attach letter to SF 270

3. TL Suspense Copy (Step D4):

a. DMVA Accounting will file the suspense copy of the TL received from the Program Office.
b. Upon receipt of the advance payment the suspense copy will be removed from the suspense file and filed as determined by the DMVA Controller.

Example DA Form 200:

TRANSMITTAL RECORD For use of this form, see AR 25-50; the proponent agency is DCSPER	1. SECURITY CLASSIFICATION UNCLAS	2. SHIPMENT NO. FY-DMVA-MM-S#
3. TITLE/FILE IDENTIFICATION SF Form 270 (Advance Request)	4. AS OF DATE *(YYYYMMDD)*	5. SHIPMENT DATE *(YYYYMMDD)*
6. AUTHORITY FOR SHIPMENT DFAS-IN Regulation 37-1. Chapter 3, paragraph 3-8	7. NUMBER OF RECORDS TRANSMITTED	
8. PERSON TO CONTACT *(Name and telephone)* Carol Mentone, 303-677-8723	9. REQUIREMENT CONTROL SYMBOL *(AR 335-15)*	
10. SHIPPED FROM DMVA Accounting Office 6848 South Revere Parkway Englewood, CO 80112-6703	11. SHIPPED TO USPFO-Colorado ATTN: COPFO-Budget Officer 660 South Aspen Street, MS 66 Buckley Air Force Base, Aurora, CO 80011-9551 [X] RETURN RECEIPT REQUESTED *(When box is checked, sign below and return copy to sender.)*	
10a. TYPED NAME AND TITLE OF SENDER Carol Mentone, DMVA Controller	11a. TYPED NAME AND TITLE OF RECEIVER SFC Gene Diekman, Staff Accountant	
10b. SIGNATURE OF SENDER	11b. SIGNATURE OF RECEIVER AND DATE	

12. TYPE OF MEDIA TRANSMITTED

X	HARD COPY		PUNCHED CARDS		CASSETTES		
	MICROFILM		PHOTO		FICHE		

13. NUMBER OF BOXES *(Packages)*	14. NUMBER OF ITEMS
0	0

15. METHOD OF SHIPMENT

X	COURIER		FIRST CLASS		PARCEL POST		
	EXPRESS MAIL		REGISTERED				

16. SPECIAL INSTRUCTIONS

17. TYPE COMPONENT USED *(For magnetically recorded data)*

18. REMARKS

- Apx 1 SF Form 270 - Advance (
- Apx 2 SF Form 270 - Advance (
- Apx 3 SF Form 270 - Advance (
- Apx 4 SF Form 270 - Advance (
- Apx 5 SF Form 270 - Advance (
- Apx 7 SF Form 270 - Advance (
- Apx 9 SF Form 270 - Advance (
- Apx 14 SF Form 270 - Advance (
- Apx 40 SF Form 270 - Advance (

DA FORM 200, SEP 1998 PREVIOUS EDITIONS ARE OBSOLETE USAPA V1.00

4. DMVA notifies GOR of receipt of Advance Payment (Step D5)

SECTION 3
COARNG Program/Activity Manager Process

1. Procedure for Preparing Cash Flow Work Sheet (Step P1):

a. Forecast budget execution by quarter for each Appendix
b. Subtract In-Kind-Assistance (IKA)
c. Include a contingency liability allowance by quarter (if appropriate)
d. Compare Cash Flow to Obligation Plan (If Cash Flow exceeds Obligation Plan adjust Obligation Plan)
e. Adjust Cash Flow Worksheet as necessary during fiscal year

December 6, 2002

DEPARTMENT OF MILITARY AND VETERANS AFFAIRS
6848 S REVERE PKWY
CENTENNIAL, CO 80112

ESTIMATED CASH FLOW REQUIREMENTS

FISCAL YEAR 2003

MONTH		Appendix [redacted]	
OCT	02	5,225.00	
NOV	02	5,225.00	
DEC	02	5,225.00	15,675.00
JAN	03	5,225.00	
FEB	03	5,225.00	
MAR	03	5,225.00	15,675.00
APR	03	5,225.00	
MAY	03	5,225.00	
JUN	03	5,225.00	15,675.00
JUL	03	5,225.00	
AUG	03	5,225.00	
SEP	03	5,225.00	15,675.00
TOTAL		**62,700.00**	62,700.00

2. Prepare TL for Advance Transmittal (Step P3):

Produce Accounting Summary Sheet (See attachment - TBD)

Transmittal Letter for Advances Preparation Checklist

a. Gather all documents in addition to the Advance Request that need to go to USPFO. Collate each document by type.

Block 1 – Security Classification – Enter "UNCLAS" for all uses within the Cooperative Agreement.

Block 2 – Shipment No. – Enter the next sequential number for your office, such as "02-FMO-10-01" using the following format:

02 – Federal Fiscal Year
FMO – Originating Office
10 - Two-digit month
01 - Sequential number for that month

Block 3 – Title/File Identification – Enter the type of document(s) being transmitted. In this case, enter "State Advance Request(s) (SF270)".

Block 4 – As of Date (YYYYMMDD) – Enter today's date as shown

Block 5 – Shipment Date – Enter today's date

Block 6 – Authority for Shipment – Enter "DFAS-IN Regulation 37-1, Chapter 3, paragraph 3-8".

Block 7 – Number of Records Transmitted – Enter the total number of records being transmitted.

Block 8 – Person to Contact – Enter your office's Point of Contact (POC)

Block 9 – Requirement Control Symbol – Leave Blank

Block 10 – Shipped From – Enter your office's mailing address

Block 11 – Shipped To – Enter the address for USPFO. Direct advance requests to the GOR. Example: (NOTE: Check the block requesting return receipt)

USPFO-Colorado
ATTN: COPFO – Grants Officer Representative (GOR)

660 South Aspen Street, MS 66
Buckley Air Force Base, Aurora, CO 80011-9551

Transmittal Letter for Advances Preparation Checklist (Continued)

Block 10a – Typed Name and Title of Sender – Enter your information

Block 11a. – Typed Name and Title of Receiver – Enter the recipient's name and title

Block 10b – Signature of Sender – Sign when completed

Block 11b – Signature of Receiver and Date – Leave Blank

Block 12 – Type of Media Transmitted – Check the block marked "Hard Copy"

Block 13 – Number of Boxes – Enter "0"

Block 14 – Number of Items – Enter "0"

Block 15 – Method of Shipment – Check the block marked "Courier"

Block 16 – Special Instructions – Normally left blank. Enter any other special **instructions you may have, such as date required.**

Block 17 – Type Component Used – Leave blank

Block 18 – Remarks – List by type the documents being transmitted. An example is:

1 – SF1034 – FY01 (01-33L)
2 – SF270 – FY03 (Apx 1 – Oct-Dec, Apx 4 – Oct-Dec)

b. Print four (4) copies of the DA Form 200. Sign all four in block 10b. and suspense one copy for your files. Send the remaining two with the listed documents to USPFO. Send one to the GOR

c. For an Example DA Form 200 see Attachment 1.

Attachment 1
DA Form 200 (Transmittal Record – TL) Sample

TRANSMITTAL RECORD For use of this form, see AR 25-50; the proponent agency is DCSPER	1. SECURITY CLASSIFICATION UNCLAS	2. SHIPMENT NO. FY-DMVA-MM-S#
3. TITLE/FILE IDENTIFICATION SF Form 270 (Advance Request)	4. AS OF DATE *(YYYYMMDD)*	5. SHIPMENT DATE *(YYYYMMDD)*
6. AUTHORITY FOR SHIPMENT DFAS-IN Regulation 37-1. Chapter 3, paragraph 3-8	7. NUMBER OF RECORDS TRANSMITTED	
8. PERSON TO CONTACT *(Name and telephone)* Carol Mentone, 303-677-8723	9. REQUIREMENT CONTROL SYMBOL *(AR 335-15)*	
10. SHIPPED FROM DMVA Accounting Office 6848 South Revere Parkway Englewood, CO 80112-6703	11. SHIPPED TO USPFO-Colorado ATTN: COPFO-Budget Officer 660 South Aspen Street, MS 66 Buckley Air Force Base, Aurora, CO 80011-9551 [X] RETURN RECEIPT REQUESTED *(When box is checked, sign below and return copy to sender.)*	
10a. TYPED NAME AND TITLE OF SENDER Carol Mentone, DMVA Controller	11a. TYPED NAME AND TITLE OF RECEIVER SFC Gene Diekman, Staff Accountant	
10b. SIGNATURE OF SENDER	11b. SIGNATURE OF RECEIVER AND DATE	

12. TYPE OF MEDIA TRANSMITTED

X	HARD COPY		PUNCHED CARDS		CASSETTES		
	MICROFILM		PHOTO		FICHE		

13. NUMBER OF BOXES *(Packages)*	14. NUMBER OF ITEMS
0	0

15. METHOD OF SHIPMENT

X	COURIER		FIRST CLASS		PARCEL POST		
	EXPRESS MAIL		REGISTERED				

16. SPECIAL INSTRUCTIONS

17. TYPE COMPONENT USED *(For magnetically recorded data)*

18. REMARKS

- Apx 1 SF Form 270 - Advance (
- Apx 2 SF Form 270 - Advance (
- Apx 3 SF Form 270 - Advance (
- Apx 4 SF Form 270 - Advance (
- Apx 5 SF Form 270 - Advance (
- Apx 7 SF Form 270 - Advance (
- Apx 9 SF Form 270 - Advance (
- Apx 14 SF Form 270 - Advance (
- Apx 40 SF Form 270 - Advance (

DA FORM 200, SEP 1998 PREVIOUS EDITIONS ARE OBSOLETE USAPA V1.00

3. Send advance packet to USPFO GOR (Step P4):

a. Packet sent 30 days prior to new Quarter
b. Packet transmittal options:
(1) Hand carry (preferred)
(2) Interoffice mail (back-up)

4. Provide copy of TL to DMVA Accounting (Step P5)

SECTION 4
USP&FO GOR/Budget Officer/Commercial Accounts Process

1. Procedure for GOR returning TL (Step U1):

a. GOR signs TL
b. GOR sends signed copy of TL to Program Manager

2. Procedure for Advance Review by GOR/Budget Officer (Step U2):

Review Checklist for Advances (USPFO GOR/Budget Officer)

1. Review block 1a. to verify that an advance is being requested

2. Review Block 1b. to verify that this is a partial payment.

3. Review the period covered by this request in block 8. The "FROM" date should be the day following the last advance request. The "TO" date should be the end of the applicable period, typically the end of the quarter.

4. Review Block 11.

The "Federal payments previously requested" in part "h" should be the total amount of the advances given to date.

The "Estimated net cash outlays for advance period" should correspond to the cash flow worksheet that should be attached. Cross-check this against the OPlan in SABS.

5. Verify that the amount of advance requested does not exceed the allotment given to date, or the amount of allotment requested for the period indicated.

6. Validate that the accounting string in block 13 is correct for payment.

7. If necessary, suspense the advance until the necessary allotment comes in. Otherwise, immediately take to the USPFO for signature.

8. Budget Officer forwards SF 270 Advance for signature to USPFO as soon as allotment is available

9. Take the signed form to Commercial Accounts for payment.

10. If the amount of the advance requested exceeds the allotment received, particularly during a period of Continuing Resolution Authority (CRA), make a copy of the advance, then adjust the

amount requested down to the amount available. Suspense the copy until more allotment comes in, and pay the remaining amount (or what is available).

3. USPFO signs Advance (Step U3):
(Note: USPFO has 2 days from allotment availability to sign the advance)

a. USPFO signs block 13 of SF 270 Advance
b. USPFO returns SF 270 to Budget Officer

4. Budget officer forwards SF 270 to commercial accounts (Step U4)

5. Commercial Accounts (Step U5)
(Note: 1. Commercial accounts has 5 days to process and send to DFAS
2. This is an Operating Advance that will be decremented during the last three (3) months of the fiscal year)
a. Commercial Accounts processes Advance
b. Commercial Accounts sends packet to DFAS for payment

PAGE INTENTLY LEFT BLANK

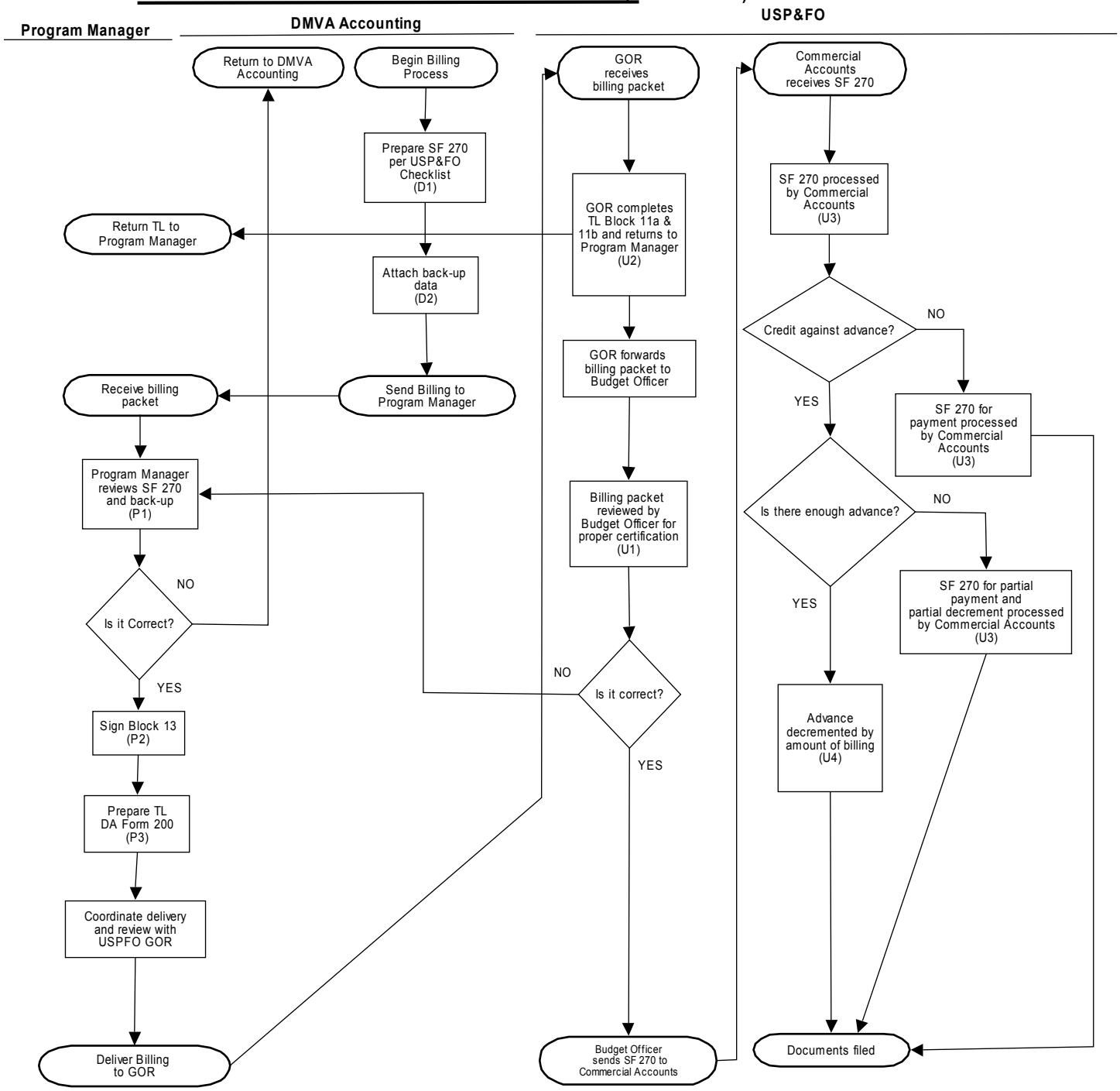
CHAPTER 3
COARNG MCA Billings Procedures

SECTION 1:
General Requirements and Flow Chart

GENERAL: Para 12-4 (a) NGR 5-1 provides guidance on reimbursement billings. This regulation specifies the process to be used in Colorado for Master Cooperative Agreement Billings.

BILLINGS: Billings will be submitted to USP&FO by DMVA at least monthly by appendix or sub-appendix activity. Each billing will offset the applicable advance payment received by DMVA.

COOPERATIVE AGREEMENT ARNG BILLING PROCESS (Rev 10-28-05)



SECTION 2
DMVA Accounting Procedures

1. Preparing SF 270 for Billing/Reimbursement (Step D1)

General: There is a separate reimbursement form set up for each appendix. Make sure you use the correct form for each Appendix.

Completion Instructions: (Example at Attachment 1)

BOX #

1a Make sure the 1a REIMBURSEMENT box is checked and not the ADVANCE box

1b Make sure box 1b PARTIAL is checked

2 Check box for CASH

4 DAHA # must match the appendix #

8 Change the dates to reflect the period covered by this reimbursement

11(a) Program #

11a Total program outlays to date (to date total of 11c box for the fiscal year)

11h Total previously requested (total of 11c box without the current one)

Attachment 1
SF 270 BILLINGS/REIMBURSEMENT

Computer-Generated Form

REQUEST FOR ADVANCE OR REIMBURSEMENT (See instructions on back)	OMB APPROVAL NO. 0348-0004	PAGE 1 OF 1 PAGES
	1. TYPE OF PAYMENT REQUESTED — a. "X" one or both boxes: ☐ ADVANCE ☑ REIMBURSEMENT; b. "X" the applicable box: ☐ FINAL ☑ PARTIAL	2. BASIS OF REQUEST: ☑ CASH $ 12,537.98 Issue a check please; ☑ ACCRUAL $ 37,725.01
3. FEDERAL SPONSORING AGENCY AND ORGANIZATIONAL ELEMENT TO WHICH THIS REPORT IS SUBMITTED: USPFO-CO	4. FEDERAL GRANT OR OTHER IDENTIFYING NUMBER ASSIGNED BY FEDERAL AGENCY: DAHA-05-05-2-1005	5. PARTIAL PAYMENT REQUEST NUMBER FOR THIS REQUEST: DMVA VOUCHER # 05-08Y
6. EMPLOYER IDENTIFICATION NUMBER: 84-9980000	7. RECIPIENT'S ACCOUNT NUMBER OR IDENTIFYING NUMBER: 84-0644739	8. PERIOD COVERED BY THIS REQUEST: FROM (month, day, year) 5/1/2005; TO (month, day, year) 5/31/2005
9. RECIPIENT ORGANIZATION: Name: Colorado Dept. of Military & Veterans Affairs; Number and Street: 6848 South Revere Parkway; City, State and ZIP Code: Centennial, CO 80112-6703	10. PAYEE (Where check is to be sent if different than item 9): Name: ; Number and Street: ; City, State and ZIP Code:	

11. COMPUTATION OF AMOUNT OF REIMBURSEMENTS/ADVANCES REQUESTED

PROGRAMS/FUNCTIONS/ACTIVITIES	(a) 1310MXCB	(b)	(c)	TOTAL
a. Total program outlays to date (As of date) 05/23/05	$94,137.98			$94,137.98
b. Less: Cumulative program income	$0.00			$0.00
c. Net program outlays (Line a minus line b)	$94,137.98			$94,137.98
d. Estimated net cash outlays for advance period	$0.00			$0.00
e. Total (Sum of lines c & d)	$94,137.98			$94,137.98
f. Non-Federal share of amount on line e	$0.00			$0.00
g. Federal share of amount on line e	$94,137.98			$94,137.98
h. Federal payments previously requested	$43,874.99			$43,874.99
i. Federal share now requested (Line g minus line h)	$50,262.99			$50,262.99
j. Advances required by month, when requested by Federal grantor agency for use in making prescheduled advances — 1st month				
2nd month		SUBMIT INVOICE IN ACCORDANCE		
3rd month		WITH AWARD INSTRUCTIONS		

12. ALTERNATE COMPUTATION FOR ADVANCES ONLY

a. Estimated Federal cash outlays that will be made during period covered by the advance	
b. Less: Estimated balance of Federal cash on hand as of beginning of advance period	
c. Amount requested (Line a minus line b)	

13. CERTIFICATION

I certify that to the best of my knowledge and belief the data on the reverse are correct and that all outlays were made in accordance with the grant conditions or other agreement and that payment is due and has not been previously requested.

SIGNATURE OR AUTHORIZED CERTIFYING OFFICIAL	DATE REQUEST SUBMITTED
TYPED OR PRINTED NAME AND TITLE: LTC ROBERT WEBER, DCSIM	TELEPHONE (AREA CODE, NUMBER, EXTENSION): 720-250-1100

This space for agency use: 2152065 18-1005 131G9500 233F MXCB A05CA00950004A HV0745 S05073 8AZAA 21 $50,262.99

AUTHORIZED FOR LOCAL REPRODUCTION 6/23/2005 Jana Sanchez 1535 STANDARD FORM 270 (Rev. 7-97) Prescribed by OMB Circulars A-102 and A-110

2. Attach Back-up data (Step D2):

Each SF 270 will have attached to it some or all of the following:

a. SF 1034 Public Voucher for Purchase and Services (required) – Attachment 1
b. Summary by AMSCO (required) – Attachment 2
c. Summary by GBL (required) – Attachment 3
d. Current and Cumulative Costs (required) – Attachment 4
e. Payroll Costs (if applicable) – Attachment 5
f. Payroll Extract (if applicable) – Attachment 6
g. CPP Costs (required) – Attachment 7
h. CPP Agreement Extract (required) – Attachment 8
i. Detail Charges by GBL/AMSCO (for each GBL that incurred costs) – Attachment 9
j. Payment Voucher back-up (for each payment made) – Attachment 10
k. Communications Charges back-up (if applicable) – Attachment 11

Attachment 1
SF 1034 Public Voucher for Purchase and Services (required)

Standard Form 1034, Revised October 1987
Department of the Treasury
1 TFM 4-2000
1034-121

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

VOUCHER NO. 03-11K

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION

USPFO for Colorado
Stop 66
Buckley ARNG Base

DATE VOUCHER PREPARED 19-Jun-03

CONTRACT NUMBER AND DATE DAHA-05-03-2-[redacted]

REQUISITION NUMBER AND DATE

SCHEDULE NO.

PAID BY

PAYEE'S NAME AND ADDRESS
Colorado Dept of Military Affairs
Attn: Budget & Fiscal
6848 S. Revere Parkway
Englewood, CO 80112-6703

DATE INVOICE RECEIVED

DISCOUNT TERMS

PAYEE'S ACCOUNT NUMBER

SHIPPED FROM | TO | WEIGHT

GOVERNMENT B/L NUMBER

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES (Enter description, item number or contract or Federal supply schedule, and other information deemed necessary)	QUAN-TITY	UNIT PRICE COST	UNIT PRICE PER	AMOUNT
	May 2003	Consolidated Phone Services				$ [redacted]
		Personnel Costs				$ [redacted]
						$ -

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL** [redacted]

PAYMENT:
( ) PROVISIONAL
( ) COMPLETE
( ) PARTIAL
( ) FINAL
( ) PROGRESS
( ) ADVANCE

APPROVED FOR =$ [redacted]

EXCHANGE RATE =$1.00

DIFFERENCES

BY [redacted]

Amount verified; correct for

TITLE Program Manager

(Signature or initials)

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

(Date) (Authorized Certifying Officer) (Title)

ACCOUNTING CLASSIFICATION

COPY

CHECK NUMBER | ON ACCOUNT OF U.S. TREASURY | CHECK NUMBER | ON (Name of bank)

CASH $ | DATE | PAYEE

PRIVACY ACT STATEMENT

The information requested on this form is required under the provisions of 31 U.S.C. 82b and 82c, for the purpose of disbursing Federal money. The information requested is to identify the particular creditor and the amounts to be paid. Failure to furnish this information will hinder discharge of the payment obligation.

PER

TITLE

Attachment 2
Summary by AMSCO (required)

		Current Month	FFY to Date
131G95.11	[redacted]	[redacted]	[redacted]
	[redacted]	0.00	0.00
	[redacted]	0.00	0.00
131G95.14	[redacted]	0.00	0.00
131G95.11	[redacted]	124.50	996.00
		[redacted]	[redacted]

FT CARSON UTILITIES		
TOTAL ALLOTED	$	-
TOTAL BILLED TO DATE	$	[redacted]
TOTAL AVAILABLE	$	-

Attachment 3
Summary by GBL (required)

GBL Summary

Billing		03-11K
Date		19-Jun-03
GBL		
[redacted]	$	[redacted]
[redacted]	$	-
[redacted]	$	-
[redacted]	$	-
[redacted]	$	[redacted]
Total -	$	[redacted]

Attachment 4
Current and Cumulative Costs (required)

Summary

May 2003

Adjutant Generals Office
State of Colorado
6848 S. Revere Pkwy
Englewood, CO 80112-6703

Fed. Fiscal Yr. '03 Current Period 8

	Analysis of Claimed Current & Cumulative Costs	Amount for Period Billed	Percent Federal	Cumulative amount from inception to date of this bill
	OPERATIONS	100%	100%	
	ARNG [redacted]	[redacted]	[redacted]	[redacted].11
	ARNG [redacted]	[redacted]	[redacted]	[redacted]5.11
	Workers Comp. Allocation	0.00	0.00	[redacted]5.11
	ARNG Recruiting (K303)	0.00	0.00	0.00 [redacted]5.11
	ARNG Telecom (K304)	0.00	0.00	0.00 [redacted]5.14
CPP/DACP	ARNG [redacted]	[redacted]	[redacted]	[redacted]5.11
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
	TOTAL	[redacted]	[redacted]	[redacted]
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
	TOTAL	0.00	0.00	0.00
			TOTAL	[redacted] [redacted]
	Total Amount Claimed			[redacted]

COPY

Attachment 5
Payroll Costs (if applicable)

ARNG Telecom Cooperative Agreement

May
2002

			AMOUNT FOR CURRENT PERIOD	YEAR TO DATE
Current FFY Period	8			
Cum Period	1	8		
OPERATIONS:				
			M05 P/R	FFY'03
1 Employee Name			$ -	$ -
2 [redacted]	[redacted]	[redacted]	$ [redacted]	$ [redacted]
3			$ -	$ -
4			$ -	$ -
5			$ -	$ -
6			$ -	$ -
7			$ -	$ -
8			$ -	$ -
9			$ -	$ -
10			$ -	$ -
11				
12				
13				
14				
15 Sub-total:			$ [redacted]	$ [redacted]
16 Retirement:			$ [redacted]	$ [redacted]
17 Health/Life Ins:			$ [redacted]	$ [redacted]
18			$ -	$ -
19 Medicare:			$ [redacted]	$ [redacted]
20 Workers' Comp:/Unempl			$ -	$ -
21 C-SEAP/Misc/Audit			$ -	$ -
22			$ -	$ -
23 Rounding Difference			$ -	$ -
24			--------	--------
25				
26 Subtotal ANG Base:			$ [redacted]	$ [redacted]
27			$ -	
28			$ -	$ -
29 **TOTAL BILLED ARNG Telecom**			$ [redacted]	$ [redacted]
30				
31				
32 **Temporary Employees**				
33				
34 a			$ -	$ -
35 a			$ -	$ -
36 a			$ -	$ -
37 a			$ -	$ -
38 a			$ -	$ -
39 a			$ -	$ -
40 a			$ -	$ -
41				
42			--------	--------
43				
44 Sub-total:			$ -	$ -
Retirement:			$ -	$ -
Health/Life Ins:			$ -	$ -
			$ -	$ -
Medicare:			$ -	$ -
Workers' Comp:			$ -	$ -
Rounding Difference			$ -	$ -
Subtotal ARNG Temporaries:			$ -	$ -
TOTAL BILLED:			$ [redacted]	$ [redacted]

COPY

I certify the above employees exist and expenses meet program requirements and federal requirements for reimbursement under the cooperative agreement.

Certified and approved by: _____
Program Manager

Attachment 6
Payroll Extract (if applicable)

RUN DATE: 05/22/2003
RUN TIME: 22.57.07

COLORADO FINANCIAL REPORTING SYSTEM
CONVERSION / INTERFACE SYSTEM
PAYROLL EXPENSE DISTRIBUTION

PAGE 1036
REPORT ID: DLIT410D

PAY END DATE 05-31-03
SCHEDULE M05 PAY CYCLE M1

PAY UNIT OAA
AGENCY OAA

APP	GRNT	EMPLOYEE NAME	EMPLOYEE ID	POS NBR	REGULAR PAY	OVERTIME/ OTHER EX	SHIFT DIFF.	PENSION PLANS/MATCH	HLTH/DENT LIFE	SHORT TERM DISAB	MEDICARE
	FUND [redacted]										
	ORG UNIT [redacted]										
	APPROPRIATION TOTAL				[redacted]	.00	.00	[redacted]	[redacted]	[redacted]	[redacted]
	FUND/ORG UNIT TOTAL				[redacted]	.00	.00	[redacted]	[redacted]	[redacted]	[redacted]
FUND [redacted]											
ORG UNIT [redacted]											
	[redacted]			00085	[redacted]	.00	.00	[redacted]	[redacted]	[redacted]	[redacted]
				00086		.00	.00				
				00090		.00	.00				
				00097		.00	.00				
	FUND [redacted]										
	ORG UNIT [redacted]										
	APPROPRIATION TOTAL				[redacted]	.00	.00	[redacted]	[redacted]	[redacted]	[redacted]
A05	[redacted]		[redacted]	00130	[redacted]	.00	.00	[redacted]	[redacted]	[redacted]	[redacted]
	FUND [redacted]										

Attachment 7
CPP Costs (required)

ARNG - CPP/Direct Admin. Cost Plan - 100%
AMSCO 5.11 GBL[redacted]

May
2003

	Date		PV #	Amount	Federal Amount
Rounding Adjustments-REVA				$ -	$ -
May CPP/DACP	5/31/2003	JV		$ [redacted]	$124.50
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00
				$ -	$0.00

Federal Share	100%
Federal Total	[redacted]
State Total	$ -
Total	$ [redacted]

COPY

Attachment 8
CPP Agreement Extract (required)

Centralized Personnel Plan
FFY 2003
SUMMARY MAY PERSONAL SERVICES

App #	UNIT	Chargeable Account	GBL	Std State Share	Added State Share	GRAND TOTAL	TOTAL FTE 5	ANG FF	ANG FTE	Percent of Total	ARNG FF	ARNG FTE	TOTAL FF	Percent of Total	GF	GF FTE	Percent of Total
	STATE	General Funds	OAA	100%	0%	$ 113,954	2.1473						$ -		$ 113,954	2.1473	42.9465%
	STATE	Civil Air Patrol	OCA	100%	0%	$ 5,013	0.0945						$ -		$ 5,013	0.0945	1.8893%
1	ARNG	Real Prop Ops & Maint 75/25	D	25%	0%	$ 13,296	0.2505				$ 9,972	0.1879	$ 9,971.86	3.7581%	$ 3,324	0.0626	1.2527%
1	ARNG	Real Prop Ops & Maint 100%	D	0%	0%	$ 49,890	0.9401				$ 49,890	0.9401	$ 49,890.17	18.8023%	$ -	-	0.0000%
2	ARNG	Environmental 75/25	E	25%	0%	$ 2,587	0.0488				$ 1,941	0.0366	$ 1,940.62	0.7314%	$ 647	0.0122	0.2438%
2	ARNG	Environmental 100%	E	0%	0%	$ 8,076	0.1522				$ 8,076	0.1522	$ 8,076.39	3.0438%	$ -	-	0.0000%
3	ARNG	Security Guard Activities	I	0%	0%	$ -	-				$ -	0.0000	$ -	0.0000%	$ -	-	0.0000%
4	ARNG	IDS	M	0%	0%	$ 250	0.0047				$ 250	0.0047	$ 249.78	0.0941%	$ -	-	0.0000%
5	ARNG	Telecommunications	K	0%	0%	$ 1,494	0.0282 - 1/12 = 124.50				$ 1,494	0.0282	$ 1,493.91	0.5630%	$ -	-	0.0000%
9	ARNG	Recruiting (Office Lease)	A	0%	0%	$ 2,312	0.0436				$ 2,312	0.0436	$ 2,312.32	0.8715%	$ -	-	0.0000%
14	ARNG	Admin & Records	?	0%	0%	$ 65	0.0012				$ 65	0.0012	$ 64.57	0.0243%	$ -	-	0.0000%
21	ANG	Real Prop Ops & Maint 75/25	B	25%	0%	$ 26,901	0.5069	$ 20,176	0.3802	7.6037%			$ 20,175.63		$ 6,725	0.1267	2.5346%
21	ANG	Real Prop Ops & Maint 100%	B	0%	0%	$ 15,713	0.2961	$ 15,713	0.2961	5.9217%			$ 15,712.56		$ -	-	0.0000%
21.1	ANG	Real Prop O&M 100% Wing	B	0%	0%	$ 1,189	0.0224	$ 1,189	0.0224	0.4481%			$ 1,189.10		$ -	-	0.0000%
21.2	ANG	MILCON	B	0%	0%	$ -	-	$ -	0.0000	0.0000%			$ -		$ -	-	0.0000%
21.3	ANG	Greeley 80/20	B	20%	0%	$ 4,801	0.0905	$ 3,841	0.0724	1.4476%			$ 3,840.98		$ 960	0.0181	0.3619%
22	ANG	Environmental	G	25%	0%	$ 2,304	0.0434	$ 1,728	0.0326	0.6512%			$ 1,727.80		$ 576	0.0109	0.2171%
23	ANG	Security Guard Activities	C	0%	0%	$ 7,049	0.1328	$ 7,049	0.1328	2.6564%			$ 7,048.53		$ -	-	0.0000%
25	ANG	Natural/Cultural	?	25%	0%	$ -	-	$ -	0.0000	0.0000%			$ -		$ -	-	0.0000%
26	ANG	Air Traffic Controllers	H	0%	0%	$ 10,446	0.1968	$ 10,446	0.1968	3.9369%			$ 10,446.30		$ -	-	0.0000%
						$ 265,340	$ 5.0000	$ 60,141	1.1333	22.6656%	$ 74,000	1.3944	$ 134,141	27.8886%	$ 131,200	2.4723	49.4458%
																	100.0000%

COPY

10/11/02 W - FFY 03 DACP File

Attachment 9
Detail Charges by GBL/AMSCO (for each GBL that incurred costs)

ARNG Telecom Charges 100%
131G95.11 GBL[redacted]

May
2003

Date		PV #	Amount	Federal Amount
Rounding Adjustments-REVA			$ -	$ -
5/28/03		PVOAA03-2641	$ [redacted]	[redacted]
5/31/03	IT	GW03000284	$ [redacted]	[redacted]
5/31/03	IT	DD03000377	$ [redacted]	[redacted]
4/30/03	IT	LD03016533	$ [redacted]	[redacted]
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00
			$ -	$0.00

Federal Share	100%
Federal Total	[redacted]
State Total	$ -
Total	$ [redacted]

COPY

Attachment 10
Payment Voucher back-up (for each payment made)

[redacted]

gs

```
FUNCTION:                  DOCID: PV OAA 03000002641 ✓      05/28/03    11:17:06 AM
STATUS: PEND3              BATID:                    ORG:
H-                              PAYMENT VOUCHER INPUT FORM
                                                                          gs 5/28/03
                                                                          5/28/03
      PV DATE: 05 28 03       ACCOUNTING PRD: 11 03     BUDGET FY: 03
      ACTION:  E                     PV TYPE: 1         SCH PAY DATE:

      OFF LIAB ACCT:              FA IND:      DOCUMENT TOTAL:          [redacted]
                                               CALC DOC TOTAL:
        VENDOR CODE: [redacted]  CHECK CATEGORY: O X  SINGLE CHECK FLAG: Y
        VENDOR NAME: [redacted]
                DBA:
            ADDRESS: [redacted]
               CITY: [redacted]                ST: TX  ZIP: [redacted]
    CONTRACT NUMBER:
      SELLER:  FUND:              AGENCY:                  ORG:
            SUB-ORG:           APPR CODE:              PROGRAM:
           FUNCTION:              OBJECT:              SUB-OBJ:
            REV SRC:             SUB-REV:              BS ACCT:
                GBL:            RPTG CAT:               JOB NO:
       OFF REC ACCT:
H--*S403-READY FOR APPROVAL 3


FUNCTION:                  DOCID: PV OAA 03000002641       05/28/03    11:17:09 AM
STATUS: PEND3              BATID:                    ORG:              001-001 OF 001
    LN      REFERENCE          COM    VENDOR      INV                SUB APPR
    NO CD AGY     NUMBER    LN LN     INVOICE     LN  FND AGY ORG ORG CODE PGM
    -- -- --- ------------ -- --- ------------ --- --- --- ------- ---- ----
    FUNC OBJ/SUB REV SRC SUB-REV BS ACCT GBL  RPTG  JOB/PROJ  DISC / RET TYP
    ---- ------- ------- ------- ------- ---- ---- ---------- --------------
            DESCRIPTION            QUANTITY   I/D   AMOUNT      I/D P/F FEE CD
    ---------------------------- ------------ --- ------------- --- --- ------
    RET %      RET AMOUNT    EFT IND  APPL TYPE
    ------   -------------- -------  ---------
01- 01                              M6313221E        100 OAA 6520    A05  5.11
        2631                                [redacted]
    6313221-1  04/29/03                  0.000                [redacted]
                                 N
02-                                                      OAA
```

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Attachment 11
Communications Charges back-up (if applicable)

DKLWR1

STATE OF COLORADO
DOIT - COMMUNICATION SERVICES
MONTHLY BILLING STATEMENT
FOR MONTH ENDING MAY 31

05/28/2003
PAGE 885
AGENCY PAGE 1

CAMP GEORGE WEST

AGENCY OAA NATIONAL GUARD

AGENCY	DIVISION	COST CENTER	FUND	AGY	ORG UNIT	SUB ORG	APPR CODE	OBJ CODE	SUB OBJ	PROG	BAL ACCT	GBL	RPT CAT	FUNC	PROJECT	JOB
OAA	001	L001	100	OAA	L001		A05	2630		5.11		K301	K300			

		PHONE LINE	VOICE MAIL	AUTO ATTEND	MULTI NBR	LIST CHARGE	OFF PERMISE	TOTAL CHARGE
REGULAR SERVICE	PHONE NBR [redacted]	[redacted]	0.00	0.00	0	0.00	0.00	[redacted]
REGULAR SERVICE	PHONE NBR [redacted]	[redacted]	0.00	0.00	0	0.00	0.00	[redacted]
REGULAR SERVICE	PHONE NBR [redacted]	[redacted]	0.00	0.00	0	0.00	0.00	[redacted]
REGULAR SERVICE	PHONE NBR [redacted]	[redacted]	0.00	0.00	0	0.00	0.00	[redacted]
REGULAR SERVICE	PHONE NBR [redacted]	[redacted]	0.00	0.00	0	0.00	0.00	[redacted]
IT = GW03000284	REGULAR TOTAL							[redacted]
ACCOUNT TOTAL								[redacted]
COST CENTER TOTAL								[redacted]
DIVISION TOTAL								[redacted]
AGENCY TOTAL								[redacted]

SECTION 3
COARNG Program/Activity Manager Process

1. Program Manager/Activity Manager reviews SF 270 and Back-up (Step P1):

a. Validate that the billing received is in sequence with previous billings. For example, if the last billing you received in Fiscal Year 04 was 04-02T, the next one you should receive should be labeled 04-03T. If this is not the case, address the discrepancy with the Accounting Office to locate the missing billing.

b. Review the bills contained within the billing. Validate that all charges are valid, charged against the appropriate GBL, and otherwise meets all appendix requirements as outlined in NGR 5-1. Follow any other processes outlined for your particular office. If there is a problem, bring them up with the Accounting Office. If after consultation it is found that a mistake was made, make a suspense note for yourself. The charge will likely have to go through as it is, and a correction made on the next bill. Keep this note for your records in case of auditing.

c. After validating all numbers, prepare a billing cover sheet that shows the appropriate funding levels for each AMSCO. This sheet will be used by the Commercial Accounts section at USPFO payment.

d. Make a full copy of the entire billing packet. The original packet goes to USPFO, and the copy remains in the Program Manager's office.

e. Complete a DA Form 200 (TL) to go to the GOR. Make three copies – one for your records, one for USPFO records, and one for USPFO to sign and return to you for your records.

2. Program Manager signs Block 13 (Step P2)

3. Prepare TL for Billings Transmittal (Step P3):

Transmittal Letter for Advances Preparation Checklist

a. Gather all documents in addition to the Advance Request that need to go to USPFO. Collate each document by type.

Block 1 – Security Classification – Enter "UNCLAS" for all uses within the Cooperative Agreement.

Block 2 – Shipment No. – Enter the next sequential number for your office, such as "02-FMO-10-01" using the following format:

02 – Federal Fiscal Year
FMO – Originating Office
10 - Two-digit month
01 - Sequential number for that month

Block 3 – Title/File Identification – Enter the type of document(s) being transmitted. In this case, enter "State Reimbursement Request(s) (SF270)".

Block 4 – As of Date (YYYYMMDD) – Enter today's date as shown

Block 5 – Shipment Date – Enter today's date

Block 6 – Authority for Shipment – Enter "DFAS-IN Regulation 37-1, Chapter 3, paragraph 3-8".

Block 7 – Number of Records Transmitted – Enter the total number of records being transmitted.

Block 8 – Person to Contact – Enter your office's Point of Contact (POC)

Block 9 – Requirement Control Symbol – Leave Blank

Block 10 – Shipped From – Enter your office's mailing address

Block 11 – Shipped To – Enter the address for USPFO. Direct advance requests to the GOR. Example: (NOTE: Check the block requesting return receipt)

USPFO-Colorado
ATTN: COPFO – Grants Officer Representative (GOR)
660 South Aspen Street, MS 66
Buckley Air Force Base, Aurora, CO 80011-9551

Transmittal Letter for Advances Preparation Checklist (Continued)

Block 10a – Typed Name and Title of Sender – Enter your information

Block 11a. – Typed Name and Title of Receiver – Enter the recipient's name and title

Block 10b – Signature of Sender – Sign when completed

Block 11b – Signature of Receiver and Date – Leave Blank

Block 12 – Type of Media Transmitted – Check the block marked "Hard Copy"

Block 13 – Number of Boxes – Enter "0"

Block 14 – Number of Items – Enter "0"

Block 15 – Method of Shipment – Check the block marked "Courier"

Block 16 – Special Instructions – Normally left blank. Enter any other special **instructions you may have, such as date required.**

Block 17 – Type Component Used – Leave blank

Block 18 – Remarks – List by type the documents being transmitted. An example is:

1 – SF1034 – FY01 (01-33L)
2 – SF270 – FY03 (Apx 1 – Oct-Dec, Apx 4 – Oct-Dec)

b. Print four (4) copies of the DA Form 200. Sign all four in block 10b. and suspense one copy for your files. Send the remaining two with the listed documents to USPFO. Send one to the GOR

c. For an Example DA Form 200 see Attachment 1.

Attachment 1
DA Form 200 (Transmittal Record – TL) Sample

TRANSMITTAL RECORD For use of this form, see AR 25-50; the proponent agency is DCSPER	1. SECURITY CLASSIFICATION UNCLAS	2. SHIPMENT NO. 02-FMO-10-01
3. TITLE/FILE IDENTIFICATION State Reimbursement Vouchers (SF1034)	4. AS OF DATE *(YYYYMMDD)* 2002/10/04	5. SHIPMENT DATE *(YYYYMMDD)* 2002/10/04
6. AUTHORITY FOR SHIPMENT DFAS-IN Regulation 37-1. Chapter 3, paragraph 3-8	7. NUMBER OF RECORDS TRANSMITTED 19	
8. PERSON TO CONTACT *(Name and telephone)* MAJ Kevin Fehringer, (303) 677-8928	9. REQUIREMENT CONTROL SYMBOL *(AR 335-15)*	
10. SHIPPED FROM Facilities & Engineering 6848 South Revere Parkway Englewood, CO 80112-6703	11. SHIPPED TO USPFO-Colorado ATTN: COPFO-Commercial Accounts 660 South Aspen Street, MS 66 Buckley Air Force Base, Aurora, CO 80011-9551 [X] RETURN RECEIPT REQUESTED *(When box is checked, sign below and return copy to sender.)*	
10a. TYPED NAME AND TITLE OF SENDER MAJ Kevin Fehringer, Resource Manager	11a. TYPED NAME AND TITLE OF RECEIVER MSG Gene Diekman, Cooperative Agreements God	
10b. SIGNATURE OF SENDER	11b. SIGNATURE OF RECEIVER AND DATE	

12. TYPE OF MEDIA TRANSMITTED

X	HARD COPY		PUNCHED CARDS		CASSETTES		
	MICROFILM		PHOTO		FICHE		

13. NUMBER OF BOXES *(Packages)*	14. NUMBER OF ITEMS
0	0

15. METHOD OF SHIPMENT

X	COURIER		FIRST CLASS		PARCEL POST		
	EXPRESS MAIL		REGISTERED				

16. SPECIAL INSTRUCTIONS

17. TYPE COMPONENT USED *(For magnetically recorded data)*

18. REMARKS

1 - SF1034s - FY01 - (01-33L)
4 - SF1034s - FY02 - (02-18L, 02-10S, 02-21T, 02-20E)
1 - MOD 1 Apx 1 FY03 (Unsigned)
1 - MOD 6 Apx 1 FY02 (Signed)
1 - MOD 1 Apx 9 FY03 (Unsigned)
11 - Advance Requests (Apx 1 - Oct, Apx 1 - Nov-Dec, Apx 2 - Oct-Dec, Apx 3 - Oct, Apx 3 - Nov-Dec, Apx 4 - Oct, Apx 4 - Nov-Dec, Apx 5 - Oct-Dec, Apx 9 - Oct-Dec, Apx 14 - Oct-Dec, MATES 9883-ADV-05)

DA FORM 200, SEP 1998 PREVIOUS EDITIONS ARE OBSOLETE USAPA V1.00

4. Coordinate delivery and review with USPFO GOR/Budget Officer (Step P4):

a. Packet transmittal options:

(1) Hand carry (preferred)

(2) Interoffice mail (back-up)

SECTION 4
USP&FO Budget Officer/Commercial Accounts Process

1. GOR completes and returns TL to Program Manager (Step U2):

a. GOR signs TL block 11a & 11b
b. GOR sends signed copy of TL to Program Manager

2. Procedure for Billings/Reimbursement Review by Budget Officer (Step U1):

a. Review per internal Checklist for Billings (USPFO Budget Officer)
b. If correct SF270 sent to Commercial Accounts other wise return 270 to GOR who will return to Program Manager.

3. SF 270 & SF 1034 processed by Commercial Accounts (Step U3):

(Note:. The Operating Advance that will be decremented during the last three (3) months of the fiscal year)

a. If no advance available process as payment
b. If some advance available process as combination of payment and decrement.

4. Commercial Accounts decrements Advance by amount of billing (Step U4)

a. If sufficient advance is available decrement by amount of billing.

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CHAPTER 4
COANG MCA Modifications Procedures

SECTION 1:
General Requirements and Flow Chart

TO BE PUBLISHED

SECTION 2
DMVA Accounting Procedure

SECTION 3
COANG Program/Resource Advisor Process

SECTION 4
USPFO Procedure

CHAPTER 5
COANG MCA Advance Procedures

SECTION 1:
General Requirements and Flow Chart

TO BE PUBLISHED

SECTION 2
DMVA Accounting Procedure

SECTION 3
COANG Program/Resource Advisor Process

SECTION 4
USPFO Procedure

CHAPTER 6
COANG MCA Billing Procedures

SECTION 1:
General Requirements and Flow Chart

TO BE PUBLISHED

SECTION 2
DMVA Accounting Procedure

SECTION 3
COANG Program/Resource Advisor Process

SECTION 4
USPFO Procedure

APPENDIX A
References:

NGR 5-1/ANGI 63-101 Grants and Cooperative Agreements

Colorado State Fiscal Rules

Colorado Revised Statutes

Office of Management and Budget Circular No. A-87
Cost Principles for State, Local, and Indian Tribal Governments (Cited in paras 4-3, 5-3, 5-4)

Office of Management and Budget Circular No. A-89
Federal Domestic Assistance Program Information (Cited in para 3-2)

Office of Management and Budget Circular
A-133, Audits of States, Local Governments, and Non-Profit Organizations (Cited in para 4-3)

DoD Grant and Agreement Regulations DoD 3210.6R, which includes:
32 Code of Federal Regulations (CFR) Part 25 Government-wide Debarment and Suspension (Nonprocurement) and Government-wide Requirements for Drug-Free Workplace (Grants); 32 Code of Federal Regulations (CFR) Part 28 New Restrictions on Lobbying; 32 Code of Federal Regulations (CFR) Part 33 which is the DOD implementation of OMB Circulars [Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments (Cited in paras 1-1b, 3-2)

DOD Directive 3210.6
Defense Grant and Agreement Regulatory System (DGARS) (Cited in para 3-2)

DFAS-IN Manual 37-100-XX
The Army Management Structure (Cited in paras 11-4, 51-3)

DoD Grants and Management Information System General Instruction Manual (Cited in para 3-2)

NGB Instructions for the Completion of the Defense Assistance Award Data System (DAADS) Report on Cooperative Agreements (Cited in para 3-2)

ANGR 172-1, Volll
Budget Management (Cited in para 51-4)

AFI 25-201
Support Agreement Procedures (Cited in para 6-4)

Title 31, United States Code (USC) Chapter 75 Requirements for Single Audits

Title 32 United States Code (USC) National Guard

31 Code of Federal Regulations (CFR) Part 205 Rules and Procedures for Funds Transfers

Office of Management and Budget circular No. A-102
Grants and Cooperative Agreements with State and Local Governments

Office of Management and Budget Circular A-123 Internal Control Systems

DoD Instruction 4000.19
Interservice and Intragovernmental Support