

**STATE OF MAINE  
BUREAU  
OF  
HIGHWAY SAFETY**



**LAW ENFORCEMENT  
SUBRECIPIENT  
REPORTING GUIDE**

September 2023

## **OVERVIEW**

This document is intended to provide reporting guidance to assist Maine law enforcement subrecipients that participate in Crash Reduction Overtime Patrols (CROP). Reporting must be completed on forms provided by the Maine Bureau of Highway Safety. The forms referenced in this document were attached to your grant award package. Please contact your Highway Safety Coordinator for any missing forms. This guide will walk you through all the progress and financial reporting requirements of your highway safety grant. These reports must be submitted as outlined below for each grant project.

## **FINANCIAL AND PROGRESS REPORTING**

Each subrecipient of highway safety grant funding must submit a summary narrative progress report that describes tasks and/or activities that the subrecipient has undertaken to accomplish grant objectives. Summary progress reports must be submitted even if no costs were incurred (zero claim) or no activities took place during that time period. Narrative Progress Reports are due with every claim for reimbursement. Progress Reports and reimbursements are required to be submitted on the following dates.

### **Financial Reporting Period**

Start Date	End Date	Due Date
October 1, 2023 (Contract Start Date)	December 31 <sup>st</sup> , 2023	January 15 <sup>th</sup> , 2024
January 1 <sup>st</sup> , 2024	March 31 <sup>st</sup> , 2024	April 15 <sup>th</sup> , 2024
April 1 <sup>st</sup> , 2024	June 30 <sup>th</sup> , 2024	July 15 <sup>th</sup> , 2024
July 1 <sup>st</sup> , 2024	September 15 <sup>th</sup> , 2024	October 15 <sup>th</sup> , 2024

### **Law Enforcement Officer Reporting Responsibilities**

1. Conduct the Crash Reduction Overtime Patrol (CROP)
2. Complete the CROP report with all stats for the detail. Note: Officer needs to select project area (impaired, speed, Click It or Ticket, etc.) at top of CROP report.
  - a. Officer should make note of any issues that occurred (bad weather, equipment issues, etc.) or significant events (drug seizure, warrant, etc.) in the narrative portion of the CROP report.
  - b. If an officer had to cut the detail short or got extended, this should also be noted in the narrative portion of the CROP report.
  - c. Officer must sign the CROP report.
3. After working the overtime detail, the officer should copy all summons issued during the detail and attach those to the CROP report for that detail.
4. Turn the CROP report and copies of summons to the project director.

## **Project Director Reporting Responsibilities**

1. Compile all CROP reports for reporting period
2. Verify that all information on CROP reports is correct
3. Verify that all required summonses are attached to corresponding CROP reports
4. Complete High Visibility Enforcement (HVE) Progress Report with all stats from CROP reports. Note: Project Director needs to select project area (impaired, speed, Click It or Ticket, etc.) at top of each HVE Progress Report.
5. Fill out narrative at bottom of HVE Progress Report
6. Sign the HVE Progress Report
7. Forward all documents to financial/payroll officer for preparation of financial documentation

## **FINANCIAL REPORTING**

To receive reimbursement of authorized federal grant fund expenditures, each subrecipient must submit accurate, current, and complete financial information quarterly.

The Maine Bureau of Highway Safety has three excel workbook, depending on which grant program you are working on. The workbook is tabbed at the bottom and is designed to be utilized from left to right, beginning with the “Information” tab. The following will help you in completing all the required financial forms.

- 1. Information tab** - Information entered on this tab will populate items in the financial report, match report, and reimbursement request.
  - a. Subrecipient Name
    - i. Enter “Applicant Agency” name from page # 1 of grant application
  - b. Checks payable to
    - i. The information in this section refers to how payments are received from the State of Maine and will most likely be different than the subrecipient name listed above. This information is tied to your State of Maine vendor code.
  - c. Subrecipient Tax ID
    - i. Enter your agency’s federal tax identification number
  - d. Grant Information
    - i. Enter all of your grant identification numbers along with their respective allocated award amounts. Please use the grant number identified on your subgrant contract

– example HV24-020. This information will populate all of the form headings and reimbursement request.

e. Employer contribution rates

i. Social Security – if your agency incurs additional costs for Social Security employer match contribution payments, and you are requesting reimbursement of those costs; enter the employer match contribution rate of **6.2%** in this section.

ii. Medicare - if your agency incurs additional costs for Medicare employer match contribution payments, and you are requesting reimbursement of those costs, enter the employer match contribution rate of **1.45%** in this section.

iii. Retirement - if your agency incurs additional costs for retirement employer contribution payments, and you are requesting reimbursement of those costs, enter the employer contribution rate in this section. Only MainePers Retirement Plans are allowable for reimbursement. Please be aware that retirement contribution rates usually change on July 1st of every year.

f. Vendor Code

i. Enter the vendor code from the State of Maine. This should be a number that is prefixed by VCxxxxxxxxxx.

g. Revenue Code

i. State agencies only – enter revenue code for payment

**2. Financial Report tab** – tabs are color-coded for each individual grant project.

Information should only be entered into highlighted fields. All other fields are locked. If you lack information in a locked field, it may be due to missing information on the “Information” tab.

- a. Financial Reporting Period:
- b. Officer Name
  - i. Enter first and last name of officer/deputy/trooper that conducted grant-related activities as outlined in your grant application.
- c. Date of Activity
  - i. Enter date of grant-related activity
- d. Hours
  - i. Enter number of hours of activity
- e. Overtime Rate
  - i. Enter officer/deputy/trooper’s overtime rate
- f. Date Paid
  - i. Enter date that officer/deputy/trooper was paid for activities conducted
- g. Financial Adjustment
  - i. If the total is off due to rounding issues or if some retirement rates need to be removed, you can make an adjustment to it here.
- h. Notes for Financial Adjustment
  - i. If any financial adjustments were made, please write down what they were in the box.

**3. Match Report tab** – tabs are color-coded for each individual grant project.

Information should only be entered into highlighted fields. All other fields are locked. If you lack information in a locked field, it may be due to missing information on the “Information” or “Reimbursement & Match Recap Report” tab.

- a. Employee Name
  - i. Enter first and last name of employee that conducted grant-related activities to be utilized as in-kind match funding as outlined in your grant application.
- b. Date Worked
  - i. Enter date of grant-related activity
- c. Hours
  - i. Enter number of hours of activity
- d. Salary Rate
  - i. Enter employee’s hourly rate – this should be the employee’s regular hourly rate and not overtime rate. This rate cannot include fringe.
- e. Function
  - i. Enter scope of activity conducted
- f. Date Paid
  - i. Enter date that employee was paid for activities conducted that are to be utilized for in-kind match funds.



#### **4. Reimbursement & Match Recap Report Tab**

- a. Request #
  - i. Enter number of reimbursement request
- b. Enter start and end dates of financial reporting period. These dates should coincide with quarterly reporting requirements. This information will populate the same fields in the match report and reimbursement request.
- c. Cumulative Cost Prior Period - federal funds
  - i. Enter cumulative amount of prior reimbursement requests for federal funds.
- d. Cumulative Cost Prior Period - match funds
  - i. Enter cumulative amount of prior reimbursement requests for match funds.
- e. Other (If applicable)
  - i. Under Speed enter cost of Radar(s)
  - ii. Under education enter costs of;
    - Print Materials
    - Translation Services
    - Cost of Venue

**5. Reimbursement Request (RR) tab** - tabs are color-coded for each individual grant project. Information should only be entered into highlighted fields. All other fields are locked. If you lack information in a locked field, it may be due to missing information on the “Information,” “Financial Report,” “Match Report,” “Reimbursement & Match Recap Report” tab.

- a. Box 11
  - i. Check box stating “I have included ALL required supporting documentation” if you have provided all required supporting documentation.

b. Box 12

- i. Check box stating “Please check if final request” if this is your final reimbursement request for the federal fiscal year.
- ii. Once the forms listed above are complete, please print the “Financial Report,” “Match Report,” and the “Reimbursement Request.” The forms must be signed by the following persons:

Financial Report – signed by the payroll representative listed on grant application

Match Report – signed by the payroll representative listed on grant application

Reimbursement Request – signed by the legal authority listed on grant application.

**6. Education Financial Summary Report/Match Report**

- a. Hours for reimbursement must be broken up by which program is being worked on. For example: if 4 hours was worked and the presentation was about both Impaired Driving and Speed, hours must be divided up by how long each topic was covered. Impaired Driving 2.5 Hours, Speed 1.5 Hours.
- b. Please note – Distracted Driving funding cannot be used for Education.

**7. Travel Tab \*DRE Workbook Only\***

- a. Item – put down what you are requesting for reimbursements. For example, Flights, lodging, baggage, meals, ground transportation.
- b. Cost – Put down total cost of said item.

- c. Comment - List any additional notes or clarifications you feel are needed.

### **Supporting Documentation**

**1. Payroll report (provided from agency payroll system)** – This can be provided through copies of pay stubs for periods indicated, or a payroll summary report, provided that either document provides the information below.

- a. A Payroll report must indicate that officers were in overtime status at time of CROP (supports Officer Name, Date of Activity, Hours and Overtime Rate columns of Financial Summary Report)
- b. A Payroll report must also indicate officer pay for CROP (supports Overtime Rate column of Financial Summary Report)
- c. A Payroll report should show that your agency has withheld Social Security and Medicare from your employees, which should coincide with your federally mandated match payment. This may have to be generated in a separate report with some payroll accounting systems (supports Social Security and Medicare columns of Financial Summary Report).
- d. Retirement contributions should also be documented. If your payroll accounting system cannot provide that information, see below.

### **2. Retirement contract**

- a. If you cannot support the retirement contributions outlined in the Retirement column of the Financial Summary Report, then the subrecipient may provide MeBHS with a copy of their current retirement contract. Once MeBHS has a copy of this contract in file indicating the type of plan (1C, 2C, 3C, etc.) and the corresponding percentage paid by both employer and employee, MeBHS will not require it again until there is a change in contract or contributions (supports

Retirement column of Financial Summary Report).

### **Allowable Match**

The below is a list of what is allowable to claim for match. These items must be listed in your grant application for us to accept them. If your application has already been submitted and approved, you can submit a Subgrant Program Revision form to include these items. If there is something you would like to claim as match, but it isn't on the list, please reach out to a Highway Safety Coordinator prior for approval.

#### **1. Grant Administration**

- a. This includes scheduling of details, compiling and completing paperwork for reimbursements, pulling payroll, and e-mailing and calling MeBHS about the grant.

#### **2. In Kind Details**

- a. These are details done on straight time by officers. When submitting, these must include crop reports, any grant related citations, and payroll back up.
- b. Details can be conducted by part time or reserve officers.
- c. Details are to be conducted during times and locations identified in problem ID.
- d. Details should be scheduled for at least 2 hours.

#### **3. Social Media**

- a. The creation of and distribution of social media posts are allowable if the time is reasonable.
- b. Include a copy of the post in your Reimbursement Request.

#### **4. Fringe Benefits (OT Details Only)**

- a. If you don't want to be reimbursed for fringe benefits, it can be used for match. This is calculated on a separate form, please reach out to MeBHS for copy.

## **5. Criminal Reports**

- a. If a criminal stop was conducted on your OT details, the writing of the report can be used for match.
- b. The time taken to write the report needs to be reasonable, and we will need a copy of the report.

## **6. DRE/FP Training Time or Conference**

- a. If an officer travels out of state for DRE Certification Training, their straight time there can be used as Match.
- b. If an officer travels out of state for the DRE Conference, their straight time there can be used as Match.
- c. If an officer attends Forensic Phlebotomy Training, their straight time there can be used as Match.
- d. Payroll backup is required.

## **7. Creation of Educational Component & Presentation**

- a. Break down the officer's time spent on this by project.
- b. All of the officer's time spent on education can be used as match.

## **Document Checklists for Quarterly Reporting – HVE & Education**

1. If your agency has conducted activities during reporting period and you are requesting reimbursement:
  - Reimbursement request signed by legal authority
  - Financial Report signed by financial/payroll representative
  - Match Report signed by financial/payroll representative
  - Review and include the Reimbursement & Match Recap Report
  - Supporting payroll documentation for activities conducted during reporting period (Include Social Security, Medicare, and MainePers Retirement if applicable)
  - HVE Progress Report signed by project director
  - Education Summary Progress Report signed by project director
  - HVE Summary Progress Report (**Only required for Final RR**)
  - CROP reports for each detail conducted during reporting period
  - Copies of summons issued during CROPs (citation #s for agencies on eCitation)
  
2. If your agency has **not** conducted any activities during reporting period:
  - HVE Progress Report and Education Summary Progress Report indicating that no activities were conducted during reporting period

**The signed completed forms must be scanned and emailed to [bhsgrant.mdps@maine.gov](mailto:bhsgrant.mdps@maine.gov)**

## **Document Checklists for Quarterly Reporting – DRE/FP Callout and Training**

1. If your agency has conducted overtime callouts during reporting period and you are requesting reimbursement:
  - Reimbursement request signed by legal authority
  - Financial Report signed by financial/payroll representative
  - Match Report signed by financial/payroll representative
  - Travel Report signed by financial/payroll representative
  - All Receipts for travel reimbursement.
  - Certificate of Completion of DRE (or FP) Course
  - Supporting payroll documentation for activities conducted during reporting period (Include Social Security, Medicare, and MainePers Retirement if applicable)
  - DRE Summary Progress Report
  - Page 1 of DRE Face Sheet, or Blood Draw Report for each overtime callout
  
2. If your agency has **not** conducted any activities during reporting period:
  - DRE/FP Summary Progress Report indicating that no activities were conducted during reporting period

**The signed completed forms must be scanned and emailed to [bhsgrant.mdps@maine.gov](mailto:bhsgrant.mdps@maine.gov)**

## **RESOURCES**

[Maine Bureau of Highway Safety - Department Public Safety](#)

[Forms for Details, Reimbursements, & Grants Management Manual](#)

[Uniform Guidance - Part 200](#)

### **Maine BHS Contacts**

- Lauren V. Stewart, Director, (207) 592-0258, [lauren.v.stewart@maine.gov](mailto:lauren.v.stewart@maine.gov)
- Jaime L. Pelotte, Grant Manager/FARS Supervisor, (207) 620-0275 [jaime.l.pelotte@maine.gov](mailto:jaime.l.pelotte@maine.gov)

#### **Highway Safety Coordinators**

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