

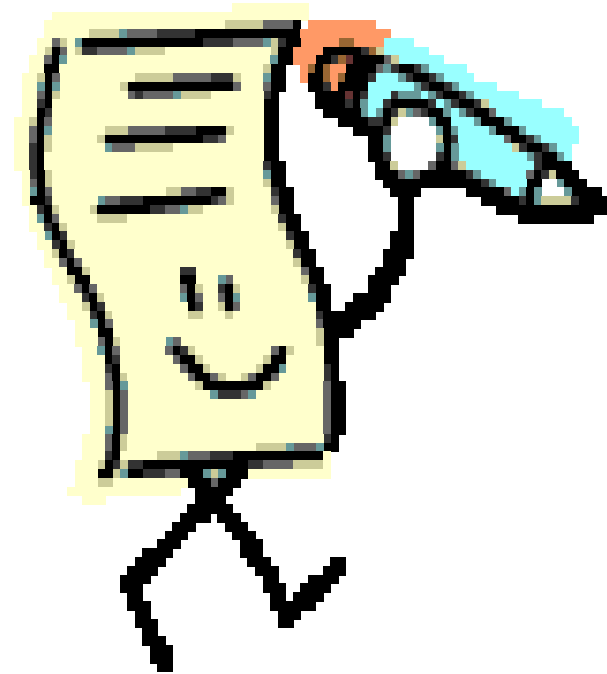
Energy Grants (MPSC)

August 7, 2009

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Management Services Division

Background on Energy Grants

The grants come from the state's Low-Income and Energy Efficiency Fund (LIEEF) initially established as part of the Customer Choice and Electric Reliability Act of 2000. Public Act 141 was passed by the state legislature and was signed by former Michigan Governor John Engler on June 3, 2000.



Background on Energy Grants

- Customer Choice and Electric Reliability Act of 2000. Act No. 141, Senate Bill No. 937 and Senate Bill 1253.



Background on Energy Grants

The purpose of the Fund is to provide shut-off and other protection for low income customers and to promote energy efficiency by all customer classes.

Procedural Framework Three Broad Categories Based on Act 141

- Energy assistance for low-income customers
- Conservation and energy efficiency measures targeted toward reducing the energy use and energy bills of low-income customers; and
- The development of energy efficiency programs that benefit all customer classes.

P.A. 141

- Requires the Public Service Commission (PSC) to issue orders to prevent slamming and cramming with significant penalties, including fines up to \$70,000.
- Upgrades the electric transmission system to increase capacity by 50 percent.
- Creates a low-income and energy efficiency fund of approximately \$40 million per year for six years.

P.A. 141

- Creates a customer education program.
- Creates shut-off protection for seniors and low-income customers.
- Permits the licensing of new suppliers.

P.A. 141

- Establishes an annual true-up to insure that utilities do not over-recover stranded costs; and emissions from the state's utilities on the environment

Low-Income Home Energy Assistance Program (LIHEAP)

- LIHEAP is federal money given to each state to assist low-income families with energy costs. In Michigan, the LIHEAP block grant is used for the following programs:
- Home Heating Credit
- State Emergency Relief (SER)
- Weatherization Assistance Program (WAP)

Home Heating Credit

- The Home Heating Credit is available to all low-income households.
- The Michigan Department of Treasury determines eligibility and makes the payments.
- You do not need to file a state income tax return to receive the Home Heating Credit.

Home Heating Credit

- You may apply for the Home Heating Credit only;
- Eligibility is based on income, number of exemption and household heating costs.

FOR MORE INFO...

<http://www.michigan.gov/treasury>

State Emergency Relief (SER)

- The State Emergency Relief (SER) program is administered by the Department of Human Services (DHS). An application is needed to request assistance and an appointment is generally required.

State Emergency Relief (SER)

- SER is a crisis intervention program and provides services as payment for heating fuel, electricity and home repairs. Eligibility is based on:
- Demonstration of immediate need (shut off notice);
- Declared need for a deliverable fuel, such as fuel oil;
- Verified need for energy related home repair income;
- Assets.

State Emergency Relief (SER) Payments

- Heating fuel has an annual maximum of \$350 to \$700 depending on the fuel type. The maximum payment may change based on available funding.
- State Energy related home repairs have a \$1500 lifetime limit per household.
- Heating, Electric and home repairs are only issued to enrolled LIHESP provider. The enrollment form is the DHS-355.

FOR MORE INFO...

Contact the US Department of Human Services Office for information

Weatherization Assistance Program (WAP)

Michigan's Weatherization Assistance Program (WAP) is a federally funded, low-income residential energy conservation program. The program provides free home energy and lower utility bills, thus creating more self-sufficient households.

Weatherization Assistance Program (WAP)

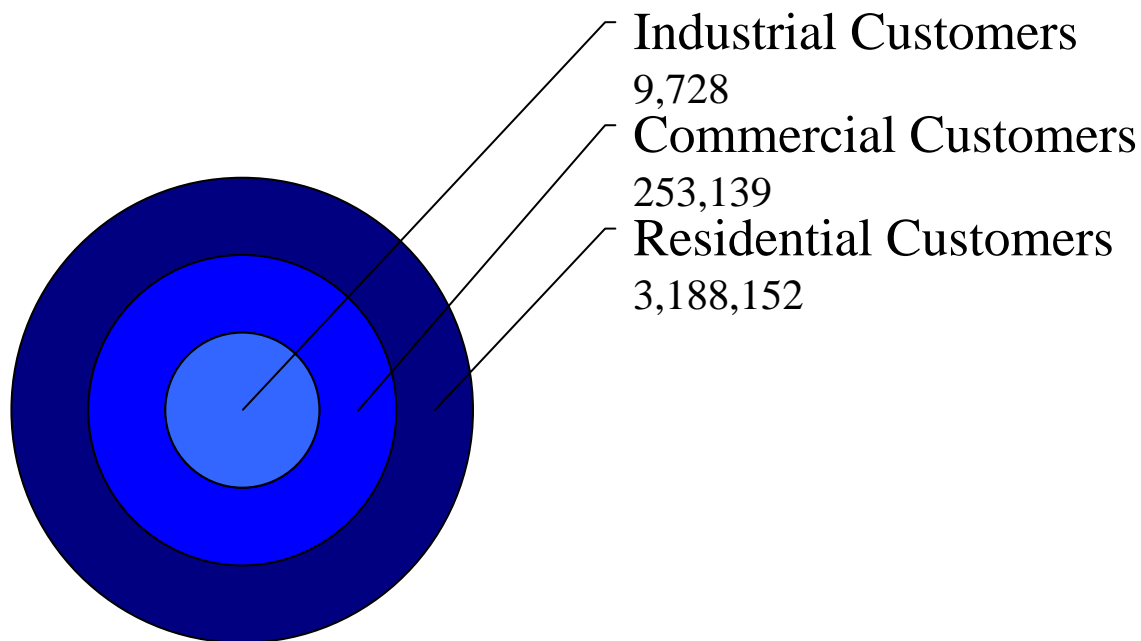
- Services are typically administered by local community action agencies and include:
- Wall insulation
- Attic insulation and Ventilation
- Foundation Insulation
- Air Leakage Reduction
- Smoke Detectors
- Dryer Venting

FOR MORE INFO...

<http://www.michigan.gov/heatingassistance>

Retail Unbundling in Michigan

Industrial Customers
(Consumed approximately
328, 164, and 177
billion cubic feet of
natural gas, respectively)



*The average prices residential, commercial, and industrial customers paid for natural gas from local distributor companies were \$11.06, \$10.02, and \$9.47 per thousand cubic feet, respectively.
Natural gas sales by marketers are included in the average price paid by commercial customers

Eligibility and Participation by Customer Class, December 2008

Customer Type	2007 Customer Total	Eligible December 2008		Participating December 2008		
		Total	Percent of 2007 Customer Total	Total	Percent of Eligible	Percent of 2007 Customer Total
Residential	3,188,152	3,152,568	98.9	296,704	9.4	9.3
Commercial	253,139	250,287	98.9	33,883	13.5	13.4
Total	3,441,291	3,402,855	98.9	330,587	9.7	9.6

*Commercial eligibility and participation data include one company's industrial customers. Sources: 2007 Customer Total: Energy Information Administration, Natural Gas Annual 2007 (January 2009)

Total Eligible: Based on company customer counts reported on Form EIA-176, 'Annual Report of natural and Supplemental Gas Supply and Disposition,' which is the primary data source for the Natural Gas Annual. Total Participating: Michigan Public Service Commission (February 2009)

http://www.eia.doe.gov/oil_gas/natural_gas/restructure/state/mi.html

How the Process Works

- Reaching the Applicant (s)
- Word of Mouth
- List Serve (notification via e-mail)
- Providing a website:
www.michigan.gov/mpsc

How the Process Works

Michigan Public Service Commission goals include development and improvement of energy efficiency technologies and development of green community programs, improvement of energy efficiency, advancement of emergency technology, expansion of renewable energy, and increased availability of energy technology.

Eligibility

- Non-profit
- Public
- Private organization

How the Process Works

- Preferences will be given to projects that:
- Have a positive impact on energy efficiency and the economy of Michigan;
- Have existing administrative structure to handle additional projects;
- Have a high ratio of direct deliverables compared to administrative costs;
- Are Michigan-based;
- Breadth of applicability of results in Michigan.

Reporting Requirements

- Bi-monthly reports
- Financial Status reports

Information Required From Applicants

A successful pre-proposal will include complete, concise responses to the following questions:

Pre-Proposal Questions

1. What is the problem being addressed by this project?
 - a. What energy efficiency technology or technologies are developing, planning to improve, market, or demonstrate?
 - b. At what stage of development is this energy efficiency technology?
 - c. What Michigan energy customers are affected?

Pre-Proposal Questions

2. What is the solution you are proposing to the problem described above?
 - a. How will this proposed solution address the problem?
 - b. Are there other agencies, organizations, or other types of partners currently involved with your organization in resolving this problem?
 - i. Who are they?
 - ii. What is their past and current involvement with this project?
 - iii. What is the plan for this organizations future involvement with this project?

Pre-Proposal Questions

- c. What is the time frame for resolving this problem?
- 3. What is the funding requirements for this project?
 - a. What is the projected budget for this project?
 - b. What other sources of funding will be used for this project and on what basis do you believe this funding assured?
 - c. What is the project amount requested from the Michigan Energy Efficiency Grant Fund?

Pre-Proposal Questions

4. What benefits will be realized if this project is funded?
 - a. What are the potential energy savings projected to result from this project and over what time frame?
 - b. What are the potential economic benefits to Michigan's citizens projected to result from this project and over what time frame?

Pre-Proposal Questions

- c. Which customer classes (residential, commercial, industrial) will be the primary beneficiaries of this project?
- d. Will the project have significant statewide benefit?
- 5. Is this project viewed as one-time initiative or would there be a need for additional funding in future years for this project?
- 6. Provide a brief description of your organization's qualifications to carry out this project.

Audit Guidelines Grants

- I. Review the signed agreement and any amendments
 - Determine the total grant amount, and any budget increase. Budget increases require an amendment.
 - Determine the period of performance
 - Determine who signed the agreement and whether it was signed before the effective start date.
- Agreements should have two or more signatures.
Note: which of the following signed and when. Note: any late signatures.

Grantee

Deputy Director

Project Manager or Bureau Director

Audit Guidelines Grants

- Determine the performance activities or tasks. Attach the work plan.
- Determine key personnel listed in the proposal or agreement.
- Review the detailed budget.
- Check the mathematical accuracy of the budget
- Determine if an overhead rate is included in the budget. If so, determine how the rate is applied and if justification for the rate has been submitted
- If an equipment line item is included in the budget, determine whether the agreement deals with ownership. This is most important when federal funding is involved. Refer to Attachment N of OMB A-102

Audit Guidelines Grants

- Determine the method of reimbursement, payment schedule, and/or hold back percentage.
- Note the financial and performance reporting requirements.
- Determine if the agreement specifies allowable or unallowable costs.
- Note any special terms, such as the requirement to submit travel policies or limits on the State share of costs.

Audit Guidelines Grants

- II. Review all required performance reports, obtain these from the Project Manager.
- Appropriate format and content.
 - Submitted in accordance with specified time periods
 - Review the reports to determine whether required performance measures were achieved
 - Determine that key personnel, if any, worked on the project.

Audit Guidelines Grants

III. Review the financial reports and payments made to the grantee

- Determine whether all payments were properly processed
- Conform to payment methods specified in the agreement (including hold back provisions).
- Authorized signatures obtained on C-108's and Payment Vouchers
- Budget, expenditures, and payments to date were examined before payment was made

Audit Guidelines Grants

- Trace all or a sample of payments to the Main Report to determine that each payment was properly recorded
- Obtain a copy of year-end information submitted to Finance and Administrative Services by the grantee (if any). Use this information to compare to records submitted or reviewed at the grantee's office

Audit Guidelines Grants

IV. Meet with the Project Manager

- Discuss the methods used to monitor the project
- If invoices are not required or are not expected to be submitted, obtain a contact to arrange an audit visit. Ask the Project Manager if he/she has any concerns or items for us to review during our audit visit.

Audit Guidelines Grants

- Determine if there was general satisfaction with the project/grantee's performance.

V. Determine the time period to review. This may be for one C-108 or the entire grant period.

Some grants require the submission of supporting documentation for costs reported. In those instances, a visit to the grantee and establish a date to visit their office to review financial records.

Audit Guidelines Grants

VI. Review supporting documentation for costs reported for the sample period

VII. Summarize audit findings and issue a report

- Complete the AUDIT FINDINGS worksheet and include it in the work papers.
- Discuss any problems that arose during the visit to the grantee's office with the Project Manager

Audit Guidelines Grants

- Write a report summarizing the audit findings and recommending corrective action.
- Issue the audit report to the Director of the agency that funded the grant. Include a cross referenced copy of the report in the work papers. File a copy in the agency Internal Audit file. Send a copy of the report to:

Project Manager

Department Director

Director, Finance and Administrative Services

APPENDIX A (Michigan Energy Efficiency)

V-I Budget Considerations (Numerals must be rounded to whole dollar)

(Organization's Name)

Line #	Budget Line Items	MPSC Share	In-Kind or Matched (not required)	Total
1	Personnel			
2	Salary: Name, job title, hours x rate of pay	0	0	0
3	Basic Benefits: Associated with job title above. Be specific.	0	0	0
4	Total Salaries	0	0	0
5	Total Basic Benefits:	0	0	0
6	Total Personnel:	0	0	0
7	Direct Supplies, Materials, and Equipment			
8	Name of item, number of units x cost/unit	0	0	0
9	Total Supplies, Materials, and Equipment:	0	0	0
10	Contractual Services (must be competitively bid) In narrative explain how bidding will be conducted List Services			
11	(In narrative describe service to be performed)	0	0	0
12	Total Contractual Services-Bid Out:	0	0	0
13	Travel (must use State of Michigan travel rates) In narrative provide reason for travel.			
14	Name and job title	0	0	0
15	Meals for this individual	0	0	0
16	Lodging for this individual	0	0	0
17	Mileage for this individual (\$.399 per mile)	0	0	0
18	Total Travel:	0	0	0
19	Other Expenses In narrative provide detailed explanations			
20	Name of Item, number of units x cost/unit	0	0	0
21	Total Other Expenses:	0	0	0
22	Indirect Costs (Not to exceed 20%) Decimal percentage: . _ _ _ _			
23	See Appendices B and C	0	--	--
24	Total Indirect Costs:	0	--	--
25	Total Project Costs:	0	0	0

APPENDIX B

Indirect Calculations:

In lines 1-14 enter all indirect costs associated with the operations of your organization, during the previous year.

1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15	Total*	0.00
16	Percentage - LIEEF grant award divided by total revenue**	
17	Multiply line 15 by line 16 (equals total Indirect related to this grant program)	
18	Subtract line 17 from total Grant Award	
19	Divide line 17 by line 18 (Indirect percentage)	
20	Not to exceed 20%***	

*The above expenses are based on a 12 month grant cycle. If this were a 9 month grant cycle, the total indirect expenses (line 15) should be divided by 12 and then multiplied by 9 before moving onto line 16.

**Calculate total revenue for the grant cycle and divide the LIEEF grant award by that amount.

***If line 15 exceeds 20%, Indirect must default to 20%.

APPENDIX C

Indirect Calculations:

SAMPLE

In lines 1-14 enter all indirect costs associated with the operations of your organization, during the previous year.

1	Rent	12,000.00
2	Utilities	9,800.00
3	Computer Maintenance	7,800.00
4	Office Supplies	3,600.00
5	Building Maintenance	4,700.00
6	Administrative Assistant	23,000.00
7	Administrative Assistant Benefits	11,500.00
8	Legal	2,000.00
9	Accountant	6,000.00
10	Insurance	16,000.00
11	Grant Administrator	46,000.00
12	Grant Administrator Benefits	23,000.00
13		
14		
15	Total*	165,400.00
16	Percentage - LIEEF grant award divided by total revenue**	0.6667
17	Multiply line 15 by line 16 (equals total Indirect related to this grant program)	\$110,266.67
18	Subtract line 17 from total Grant Award	889,733.33
19	Divide line 17 by line 18 (Indirect percentage)	0.1239
20	Not to exceed 20%***	

Based on total revenue of \$1,500,000 with a LIEEF grant award of \$1,000,000

*The above expenses are based on a 12 month grant cycle. If this were a 9 month grant cycle, the total indirect expenses (line 15) should be divided by 12 and then multiplied by 9 before moving onto line 16. (i.e. $\$165,400/12 = 13783.34$, $\$13783.34 \times 9 = \$124,050.06$).

**Calculate total revenue for the grant cycle and divide the LIEEF grant award by that amount.

***If line 15 exceeds 20%, Indirect must default to 20%.

Diagram for Completing Form C-108

Example:					
	Personnel	Supplies, Materials, Equipment	Contractual Services	Indirect	Total
Grant Budget:	30,000.00	5,000.00	100,000.00	6,750.00	141,750.00
Total Amount spent:	35,000.00	5,000.00	90,000.00	6,750.00	136,750.00
	(5,000.00)	0.00	10,000.00	0.00	5,000.00
5% or less of over spent category:	5,000.00	0.00	(5,000.00)	0.00	0.00
	0.00	0.00	5,000.00	0.00	5,000.00

Distribution:

White -- Contract & Grant Administration

Canary -- Bureau

Pink -- Contractor/Grantee

Michigan Department of Labor & Economic Growth

FINANCIAL STATUS REPORT AND/OR PAYMENT REQUEST

Authorized by P.A. 380 of 1965, as amended, and appropriations approved by the Legislature. Completion is required for payment.

Example

A

1. Name and Address of Vendor Organization Grantee Name and Address		2. Agency (Bureau, Commission or Authority) Michigan Public Service Commission			3. Grant or Contract Number PSC-09-XX		
		4. Federal I.D. Number or Social Security Number Grantee Federal ID no.			5. Final Report YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		6. Payment Request #2
		7. Project Title: Low-Income Energy Efficiency			8. Duration of Contract/Grant From: 10/01/07 To: 8/31/08		9. Current Report Period From: 4/1/07 To: 4/30/07

10. Cost Categories (salary, fringes, equipment, etc.)	Personnel	Supplies, Materials, Equipment	Other	In-State Travel	Direct Assistance			Total
a. Expenditures Previously Reported	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
b. Expenditures this Report Period	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
c. Expenditures to Date (line a plus line b)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
d. Non-State Share of Expenditures	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
e. State Share of Expenditures (line c minus line d)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
f. Total State Funds Authorized	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
g. Unexpended Balance of State Funds (line f minus line e)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
11. Request for Reimbursement or Advance								
h. State Share of Expenditures to Date (from line e above)								0.00
i. Total Amount of State Reimbursements and/or Advances Previously Requested								0.00
j. Advance Balance, if Applicable (line i minus line h)								0.00
k. Request Advance for Period from _____ to _____, or								
l. Request Reimbursement (line h minus line i)								0.00
12. Labor & Economic Growth Use only -- Holdback % = \$								Adjusted Payment
13. Remarks				14. Certification: I certify that to the best of my knowledge and belief this report is correct and complete and that all expenditures are for the purposes set forth in the grant award/contract documents.		15. Agency Approval		
				Appropriate representative signs here:		office use		
				signature _____ date _____		Program Manager's Signature _____ Date _____		
						office use		
						Finance Manager's Signature _____ Date _____		

6. This should read Progress Report if you are not requesting funds.

b. This is where you report expenses for the current report period. (9.)

f. These numbers come from your approved revised budget "Attachment A" in your grant contract.

i. This is any payments you have received or requested previously.

C-108 (7/97)

Distribution:

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Canary -- Bureau

Pink -- Contractor/Grantee

Michigan Department of Labor & Economic Growth

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1. Name and Address of Vendor Organization		2. Agency (Bureau, Commission or Authority)			3. Grant or Contract Number		
Grantee Name and Address		Michigan Public Service Commission			PSC-09-XX		
		4. Federal I.D. Number or Social Security Number			5. Final Report		6. Progress Report
		Grantee Federal ID no.			YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		#1
		7. Project Title:			8. Duration of Contract/Grant		9. Current Report Period
		Low-Income Energy Efficiency			From: 10/01/07 To: 7/31/08		From: 10/1/07 To: 12/31/07

10. Cost Categories (salary, fringes, equipment, etc.)	Personnel	Supplies, Materials, Equipment	Other	In-State Travel	Contractual Services-Sole Source		Total
a. Expenditures Previously Reported	0.00	0.00	0.00	0.00	0.00	0.00	0.00
b. Expenditures this Report Period	12,055.00	4,050.00	2,122.00	415.00	1,012,045.00	0.00	1,030,687.00
c. Expenditures to Date (line a plus line b)	12,055.00	4,050.00	2,122.00	415.00	1,230,050.00	0.00	1,248,692.00
d. Non-State Share of Expenditures	0.00	0.00	0.00	0.00	0.00	0.00	0.00
e. State Share of Expenditures (line c minus line d)	12,055.00	4,050.00	2,122.00	415.00	1,230,050.00	0.00	1,248,692.00
f. Total State Funds Authorized	20,000.00	5,000.00	3,000.00	700.00	2,971,300.00	0.00	3,000,000.00
g. Unexpended Balance of State Funds (line f minus line e)	7,945.00	950.00	878.00	285.00	1,741,250.00	0.00	1,751,308.00
11. Request for Reimbursement or Advance							
h. State Share of Expenditures to Date (from line e above)							1,248,692.00
i. Total Amount of State Reimbursements and/or Advances Previously Requested							1,350,000.00
j. Advance Balance, if Applicable (line i minus line h)							101,308.00
k. Request Advance for Period from _____ to _____, or							
l. Request Reimbursement (line h minus line i)							1,350,000.00
12. Labor & Economic Growth Use only -- Holdback 10 % = \$300,000							
13. Remarks							Adjusted Payment
14. Certification: I certify that to the best of my knowledge and belief this report is correct and complete and that all expenditures are for the purposes set forth in the grant award/contract documents. Appropriate representative signs here:							15. Agency Approval
							office use
							Program Manager's Signature Date
							office use
							Finance Manager's Signature Date

Example

B

c. These numbers are then carried up to line a. on the next FSR submitted.

10 h. This is the first 45% draw.

j. This is the balance of first 45% draw.

This FSR is requesting the 2nd 45% draw.

Total balance of grant funds left to be expended.

C-108 (7/97)

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FINANCIAL STATUS REPORT AND/OR PAYMENT REQUEST

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Example

C

1. Name and Address of Vendor Organization Grantee Name and Address		2. Agency (Bureau, Commission or Authority) Michigan Public Service Commission			3. Grant or Contract Number PSC-09-XX		
		4. Federal I.D. Number or Social Security Number Grantee Federal ID no.			5. Final Report YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		6. Payment Request #2
		7. Project Title: Low-Income Energy Efficiency			8. Duration of Contract/Grant From: 10/01/07 To: 8/31/08		9. Current Report Period From: 1/1/08 To: 3/30/08

10. Cost Categories (salary, fringes, equipment, etc.)	Personnel	Supplies, Materials, Equipment	Other	In-State Travel	Contractual Services- Sole Source		Total
a. Expenditures Previously Reported	12,055.00	4,050.00	2,122.00	415.00	1,012,045.00	0.00	1,030,687.00
b. Expenditures this Report Period	4,800.00	700.00	0.00	0.00	500,000.00	0.00	505,500.00
c. Expenditures to Date (line a plus line b)	16,855.00	4,750.00	2,122.00	415.00	1,512,045.00	0.00	1,536,187.00
d. Non-State Share of Expenditures	5,000.00	0.00	0.00	0.00	200,000.00	0.00	205,000.00
e. State Share of Expenditures (line c minus line d)	11,855.00	4,750.00	2,122.00	415.00	1,312,045.00	0.00	1,331,187.00
f. Total State Funds Authorized	20,000.00	5,000.00	3,000.00	700.00	2,971,300.00	0.00	3,000,000.00
g. Unexpended Balance of State Funds (line f minus line e)	8,145.00	250.00	878.00	285.00	1,659,255.00	0.00	1,668,813.00
11. Request for Reimbursement or Advance							
h. State Share of Expenditures to Date (from line e above)							1,331,187.00
i. Total Amount of State Reimbursements and/or Advances Previously Requested							2,700,000.00
j. Advance Balance, if Applicable (line i minus line h)							1,368,813.00
k. Request Advance for Period from _____ to _____, or							
l. Request Reimbursement (line h minus line i)							0.00
12. Labor & Economic Growth Use only -- Holdback 10 % = \$300,000							Adjusted Payment
13. Remarks 10% of the total grant payment will be held back pending completion of the project and submission of final documentation.							
14. Certification: I certify that to the best of my knowledge and belief this report is correct and complete and that all expenditures are for the purposes set forth in the grant award/contract documents. Appropriate representative signs here: _____ signature date					15. Agency Approval office use Program Manager's Signature Date office use Finance Manager's Signature Date		

10 c. Columns should add up horizontally and vertically, and represent all funds expended.

10 d. These are In-Kind or Match funds that were spent and are deducted from line 10 c.

10 g. Total balance left to be expended.

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FINANCIAL STATUS REPORT AND/OR PAYMENT REQUEST

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1. Name and Address of Vendor Organization Grantee Name and Address		2. Agency (Bureau, Commission or Authority) Michigan Public Service Commission		3. Grant or Contract Number PSC-09-XX		
		4. Federal I.D. Number or Social Security Number Grantee Federal ID no.		5. Final Report X YES NO		
		7. Project Title: Low-Income Energy Efficiency		6. Payment Request #3		
				8. Duration of Contract/Grant From: 10/01/07 To: 8/31/08		
				9. Current Report Period From: 4/1/08 To: 8/31/08		
10. Cost Categories (salary, fringes, equipment, etc.)	Personnel	Supplies, Materials, Equipment	Other	In-State Travel	Contractual Services-Sole Source	Total
a. Expenditures Previously Reported	16,855.00	4,750.00	2,122.00	415.00	1,512,045.00	1,536,187.00
b. Expenditures this Report Period	8,100.00	250.00	0.00	585.00	1,655,000.00	1,663,935.00
c. Expenditures to Date (line a plus line b)	24,955.00	5,000.00	2,122.00	1,000.00	3,167,045.00	3,200,122.00
d. Non-State Share of Expenditures	5,000.00	0.00	0.00	300.00	200,000.00	205,300.00
e. State Share of Expenditures (line c minus line d)	19,955.00	5,000.00	2,122.00	700.00	2,967,045.00	2,994,822.00
f. Total State Funds Authorized	20,000.00	5,000.00	3,000.00	700.00	2,971,300.00	3,000,000.00
g. Unexpended Balance of State Funds (line f minus line e)	45.00	0.00	878.00	0.00	4,255.00	5,178.00
11. Request for Reimbursement or Advance						
h. State Share of Expenditures to Date (from line e above)						2,994,822.00
i. Total Amount of State Reimbursements and/or Advances Previously Requested						2,700,000.00
j. Advance Balance, if Applicable (line i minus line h)						0.00
k. Request Advance for Period from _____ to _____, or						
l. Request Reimbursement (line h minus line i)						294,822.00
12. Labor & Economic Growth Use only -- Holdback 10 % = \$300,000					Adjusted Payment	
13. Remarks	14. Certification: I certify that to the best of my knowledge and belief this report is correct and complete and that all expenditures are for the purposes set forth in the grant award/contract documents.				15. Agency Approval	
	Appropriate representative signs here:				office use	
	signature _____ date _____				Program Manager's Signature _____ Date _____	
					office use	
					Finance Manager's Signature _____ Date _____	

Example
D

No negative numbers can be reported on Line 10.g. Any negative balances should be moved to line 10.d. Non-State share of expenditures.

Line 11. Insert MPSC Share of reimbursement amount requested for each category

Best Practices to Ensure a Successful Grant

- Prevention and Early Detection.
- Ways to Prevent Deviation.
- Pay attention to monthly report.
- Make sure the grantee keeps in consistency time frame of their proposal.

Best Practices to Ensure a Successful Grant

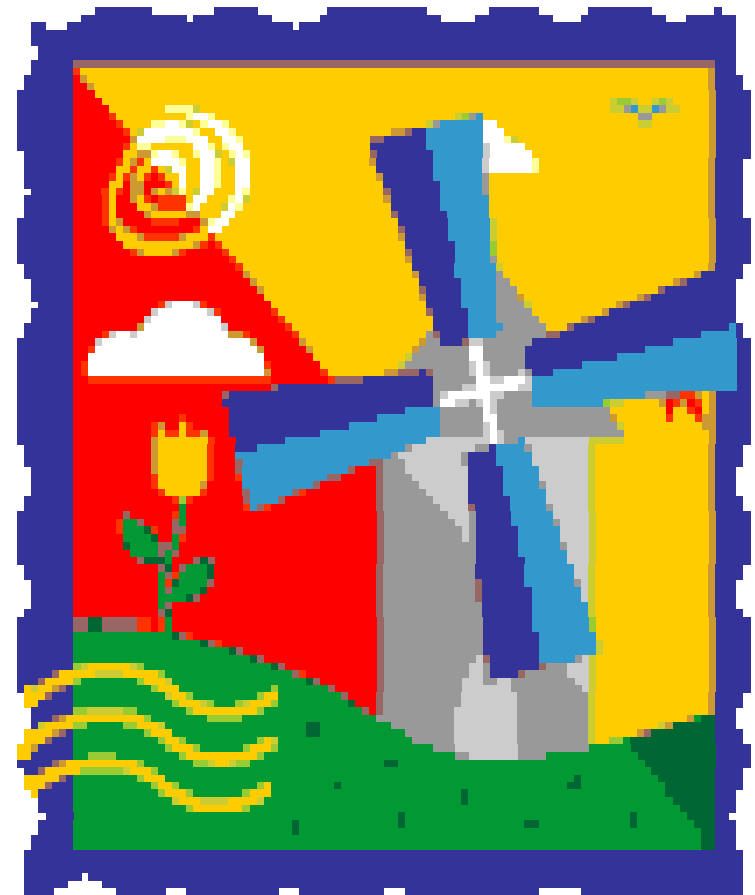
- Strengthen partnership with outreach measures: onsite visit, more conference calls, and e-mails.
- More Education on the audit process.
- Always be open to new ways of sharing information related to the grant.

Best Practices to Ensure a Successful Grant

- Better spreadsheet formulas.
- Keep track of expenditures.

Review

Energy Grants



Citations

- Additional information may be found at the Michigan Public Service Commission (Energy Grants- Low Income and Energy Efficiency Fund) website (<http://www.michigan.gov/mpsc/0,1607,7-159-52493---,00.html>)
- Additional information may be found at the Michigan Legislature website (<http://www.legislature.mi.gov>)
- Additional information may be found at the United States Department of Health and Human Services (Low-Income Home Energy Assistance Program) website (<http://liheap.ncat.org/dereg/states/michigan.htm>)
- Additional information may be found at the Michigan Public Service Commission (Administrative Rules and Guides) website (http://www.michigan.gov/mpsc/0,1607,7-159-16370_52012---,00.html)
- Additional information may be found at the Michigan Public Service Commission (Customer Choice) website (http://www.michigan.gov/mpsc/0,1607,7-159-16377_17111---,00.html)