

PERIODIC FINANCIAL REPORT (PFR)

Support Documentation Cover Page

Grant Number: 24-771XXX Grantee Name: AGENCY

NAME DUNS # UEI#

FEIN # AGENCY'S

Report Period End Date: ENTIRE REPORTING PERIOD

of Pages (including cover sheet):

Date Submitted:

Final Report

PFR Supporting Documentation to be Attached

- ⇒ Grantee must attach this cover page to the Trial Balance submitted with the PFR.
- ⇒ All Supporting Documentation must be submitted in a “single” PDF.
- ⇒ Grantee must attach a copy of the print-out from GRS screens 362 and 371.
- ⇒ If the Grantee’s fiscal system generated budget is not grant specific, a “crosswalk” document must be submitted that identifies the relationships between the Grantee budget and the grant budget.
- ⇒ A “bridge” document providing details of why GRS and the Trial Balance don’t match must be submitted – if applicable.
- ⇒ Naming Convention must be followed:
[Grant Number] [Trial Balance] [End Date of Reporting Period]
Example: 17-654XXX Trial Balance 12-31-18

DCEO

HD07GPA2

GRANTEE REPORTING SYSTEM

SUB GRANTEE COST LEDGER SUMMARY (#362)

01/15/26

08:13:27

MSG 016-YOUR REQUEST HAS BEEN SUCCESSFULLY DISPLAYED

TRANSFER TO SCREEN PRINTER FFY PROGRAM GRANT 21 - 417 GRANTEECOSTS REPORTED FROM THRU VIEW MATCH) CASH INKIND BOTH

EXP

CODE DESCRIPTION

BUDGET

COSTS

BALANCE

1000	PERSONNEL	.00	.00	.00
1001	PERSONNEL-ADULT	180,419.70	180,419.70	.00
1002	PERSONNEL-YOUTH	9,832.34	9,832.34	.00
1050	FRINGE BENEFIT	.00	.00	.00
1051	FRINGE BENEFIT-ADULT	39,488.99	39,488.99	.00
1052	FRINGE BENEFIT-YOUTH	2,517.81	2,517.81	.00
1200	SUPPLIES	.00	.00	.00
1201	SUPPLIES-ADULT	15,092.32	15,092.32	.00
1250	CONTRACTUAL	.00	.00	.00
1251	CONTRACTUAL-ADULT	46,437.25	46,437.25	.00
1252	CONTRACTUAL-YOUTH	.00	.00	.00

ENTER INQUIRY F2 NEXT GRANT F7 PREVIOUS F8 NEXT F11 TRANSFER F5 PRINT F6 MENU

DCEO

HD07GPA2

GRANTEE REPORTING SYSTEM

SUB GRANTEE COST LEDGER SUMMARY (#362)

01/15/26

08:24:36

MSG 016-YOUR REQUEST HAS BEEN SUCCESSFULLY DISPLAYED

TRANSFER TO SCREEN PRINTER FFY PROGRAM GRANT 21 - GRANTEECOSTS REPORTED FROM THRU VIEW MATCH) CASH INKIND BOTH

EXP

CODE DESCRIPTION

BUDGET

COSTS

BALANCE

1300	CONSULTANT	.00	.00	.00
1301	CONSULTANT-ADULT	34,507.11	34,507.11	.00
1302	CONSULTANT-YOUTH	.00	.00	.00
1350	OCCUPANCY	.00	.00	.00
1351	OCCUPANCY-ADULT	27,200.00	27,200.00	.00
1500	TRAINING AND EDUCATION	.00	.00	.00
1501	TRN AND EDUCATION-ADULT	5,000.00	5,000.00	.00
2001	DIRECT TRAINING COSTS	.00	.00	.00
3001	WORK BASED TRAINING	.00	.00	.00
5000	BARRIER REDUCTION FUND	.00	.00	.00
5002	YOUTH	1,750.00	1,750.00	.00

ENTER INQUIRY F2 NEXT GRANT F7 PREVIOUS F8 NEXT F11 TRANSFER F5 PRINT F6 MENU

DCEO

HD07GPA2

GRANTEE REPORTING SYSTEM

01/15/26

SUB GRANTEE COST LEDGER SUMMARY (#362)

08:26:11

MSG 015-THERE ARE NO ENTRIES ON FILE FOR THIS REQUEST

TRANSFER TO SCREEN PRINTER FFY PROGRAM

GRANT 21 - GRANTEE

COSTS REPORTED FROM THRU VIEW MATCH) CASH INKIND BOTH

EXP

CODE DESCRIPTION

BUDGET

COSTS

BALANCE

GRAND TOTAL

362,245.52

362,245.52

.00

DCEO
HD07DPBB
MSG 016-

ACCOUNTING MANAGEMENT INFORMATION SYSTEM

MISC/RECEIPTS DISBURSEMENT SUMMARY (#371)

01/15/26
08:30:35

GRANT NO.: 21
GRANTEE NAME:

CUMULATIVE BAL:	RECEIPTS	DISBURSEMENTS	BALANCE
PGM INCOME	.00	.00	.00
PGM INTEREST	.00	.00	.00
STAND IN		.00	

CURRENT TRANSACTION:

PGM INCOME

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PGM INTEREST

STAND IN

Digitized by srujanika@gmail.com

MONTH _____ YEAR _____ DESC _____

ENTER INQUIRY

F2 CHANGE

F9 HELP

F10 MENU

F11 TRANSFER

- YOUR AGENCY'S TRIAL BALANCE
- CROSSWALK IF YOUR TRIAL BALANCE DOESN'T MATCH GRS