

Cost Share Letter and Questionnaire FY 2013 Request for Partners

General Information

Use the Cost Share Letter & Questionnaire to create letters verifying cost share provided from the fiscal authority of each collaborating agency. Complete the Cost Share Allowability Assessment (Section II) first to determine eligibility of cost share source before completing Section I. After the Cost Share Letter and Questionnaire are completed, print the form and submit the unsigned letter with proposal.

Instructions

Section II: Questionnaire-Complete Parts A and B to determine if cost share funds are allowable. If the answer to all questions in Part A and B is "NO", the cost share source is eligible.

- Part A: Answer questions #1-3 by marking "X" in applicable column. If the answer to question #3 is "YES", please identify each source of cost share with an "X". A portion of these funds may be eligible for cost share.
- Part B: If the answer to #1 is "YES", please identify each source of cost share with an "X". A portion of these funds may be eligible for cost share.

Section I: After the cost share is determined to be eligible, complete the following:

- The Grand Total Amount of Cost Share (match): Calculates automatically.
- Specify the state, local or other non-federal source of funding: Specify the source of funding and verify that the funds are from non-federal, public sources available for use in SNAP-Ed.
- Check appropriate boxes to indicate type of cost share provided (Personnel, Space/Rent, and Other Items): Specify the amount provided by each type of Cost Share.

A. Personnel: Instructions for each column in the personnel table are below.

| Column | Instruction |
|--|---|
| Number of Staff | List the number of staff for each Position/Title entered. Cost share staff may be grouped in one line if each staff person has the same % of time spent on SNAP-Ed, annual salary, and annual fringe. If only 1 person is fulfilling a given position, enter "1." If like positions are combined into one line on personnel table, enter the number of individuals that fill the position described on that line. |
| Title and Specific Duties Related to SNAP-Ed | Describe how the position supports the delivery of SNAP-Ed activities. Be specific. The duties described for cost share staff should match the duties described on the staffing chart. |

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| | |
|--|--|
| Number of hrs/wk worked on SNAP-Ed | List the amount of hours that each staff person will work for the SNAP-Ed project out of a 40-hour work week. This is the number of hours per staff person, not total hours for all staff in this position. This data will be used in the automatic calculation of the % of time spent on SNAP-Ed. |
| Number of wks/yr worked on SNAP-Ed | List the number of weeks that each staff person will work for the SNAP-Ed project out of a 52 week year. This information will be used in the calculation of the % of time spent on SNAP-Ed. |
| Number of TOTAL hrs/yr worked, not only on SNAP-Ed) | List the number of hours worked per staff person for the year, including all hours worked. This information will be used in the calculation of the % of time spent on SNAP-Ed. |
| Percentage of time spent on SNAP-Ed | This amount will automatically calculate. |
| Time Period (use dates) | Enter the time period the cost share staff will be spending on SNAP-Ed programming in date format. For FY 2013 the dates are October 1, 2012 to September 30, 2013. |
| Annual Salary for ONE staff person | Enter the salary of one staff. If entering a number of staff in same line item, the amount should reflect the salary of only one staff. Individual salary amounts on the staffing chart must agree with cost share letters, if applicable. |
| Fringe Benefits | The number should be in dollars, not a percentage. |
| <i>PLEASE NOTE: Delete any unused lines in the personnel table so that formulas for "Grand Total Amount of Cost Share" and "Total Cost Share Personnel" calculate correctly.</i> | |

B. Space/Rent

If space is used as cost share, complete the applicable Space Calculation form included in the RFP documents.

C. Other Items

Attach a list of other activities or costs that will be provided as cost share. Describe how cost share is related to SNAP-Ed and how it will be documented. Indirect costs used as cost share should be listed here.

The total of sections A through C will total in the **Grand Total of Cost Share** section of the cost share letter.