VOCA Month Expenditure Report Instructions

- Please complete following sections:
  - **Agency** (Agency Name)
  - **Region** (Assigned Region: Please see review contract)
  - **Invoice Period** (Month of Expenses)
  - **Program Period** (Start and end date of Contract)

- **Budget Line Items:**
  - **Budgeted** (Total award amount)
  - **Month Expenditures** (Cumulative amount for monthly reimbursement expenses)

- **YTD Total** (You will need to hard number this in each month)

- **Budget Remaining** (Form is formatted to calculate)

- **Match Amount** (Match is waived at the moment) You will hard number your match amount into the line items.

- **Categories** - **Total Monthly expenditures has to match your Invoice sheet.**
  - **Personnel** (Cumulative amount for monthly reimbursement expenses)
  - **Benefits** (Cumulative amount for monthly reimbursement expenses) (Agency Budget)
  - **PRN** (Cumulative amount for monthly reimbursement expenses)
  - **Volunteers** (Cumulative amount for monthly reimbursement expenses/Match Only)
  - **On Call Volunteers** (Cumulative amount for monthly reimbursement expenses)/Match Only)
  - **Travel/Training** (Cumulative amount for monthly reimbursement expenses)
  - **Equipment** (Cumulative amount for monthly reimbursement expenses)
  - **Supplies/Operation** (Cumulative amount for monthly reimbursement expenses)
  - **Contractual** (Cumulative amount for monthly reimbursement expenses)
  - **Indirect Cost** (Cumulative amount for monthly reimbursement expenses)

- Please submit your Invoice to the following email address:
  W&CL.INVOICES@dss.mo.gov