

Customized Training Invoicing Instructions

Begin by typing <http://www.state.nj.us/> in your Internet browser window. Click on the **Login** button located in the upper left-hand corner of the screen. This will cause a *Security Alert* to appear, Click **OK**. You are now ready to enter the *MyNewJersey* portal. To gain access enter your **Log On ID** and **Password**. Click the **Log On** button when finished.

After a successful login, you will see a Customized Training window. Click on the link “Welcome to the Customized Training System” which will open a browser window titled, Select FIEN. Select the application by clicking the FIEN number.

To begin, place your pointer on the block labeled **Invoice**. This will cause a new block labeled **CREATE/MODIFY/VIEW/DELETE** to appear. Click on **CREATE** to start. You will be taken directly to the agreement start date and end date page. Click on the select button located on the right side of the page. This will take you to a page titled “**INVOICING - REIMBURSEMENT REQUEST FOR AGREEMENT NUMBER (ADD/MOD DETAILS).**” Your contract number will be listed.



Button Functions

- **ADD/MODIFY COURSE:** Allows additional courses and/or sessions to be added to current invoice.
- **COMPLETE/SAVE:** Saves all data entered into system
- **VIEW SUMMARY:** Provides grantee with an overview of invoice being billed
- **RESET VALUES:** Clears all data

STEP 1 - Course Name:

- Enter the name of the course from the drop down box located on the right side of the page.

Note: Course Type, Training Provider & Total Hrs Allowed will be automatically entered.

STEP 2 – Session Number:

- Enter the session number from the drop down box located on the right side of the page.

*Note: Please be sure to enter the correct course and session number. If any errors occur, you may not receive the proper reimbursement amount. **Classroom/On The Job invoicing examples are at end of instructions.***

STEP 3 – Trainee Data:

- If the training is Classroom training then enter the trainee data in the fields located at the bottom of the page. Begin with first name, last name, middle initial, social security number, date trained from, date trained to, and hours charged. If you need more lines, select the more lines button located below the trainee information fields. **Note: Once a trainee has reached maximum amount of trainee hours, he/she cannot be entered into additional sessions.**
- If the training is **On The Job** training or the Training Provider is **In-House** then you are required to enter in the actual employee wage in the ARTH * field. If the training provider is a Vendor then the ARTH * field will automatically be filled out and is not editable.

(Note: This is a data entry screen for grantee. Data to be sorted by: Classroom, Classroom-Emp, OJT.)
 Requests will be entered one at a time, as selected by the User.

Course Name: BASIC SKILLS, WORK READINESS SKILLS (SELF)

Course Type: ON THE JOB Session Number: 2

Training Provider: SELF Total Hrs allowed: 8.0

(All Dates to be entered in mmd/yyyy format)
 (* - Allowable Reimbursement per trainee hour)
 (** Trainee entry will be discarded without a valid trainee SSN)
 (***) Hourly wage is the calculated average per trainee for third party training sessions)

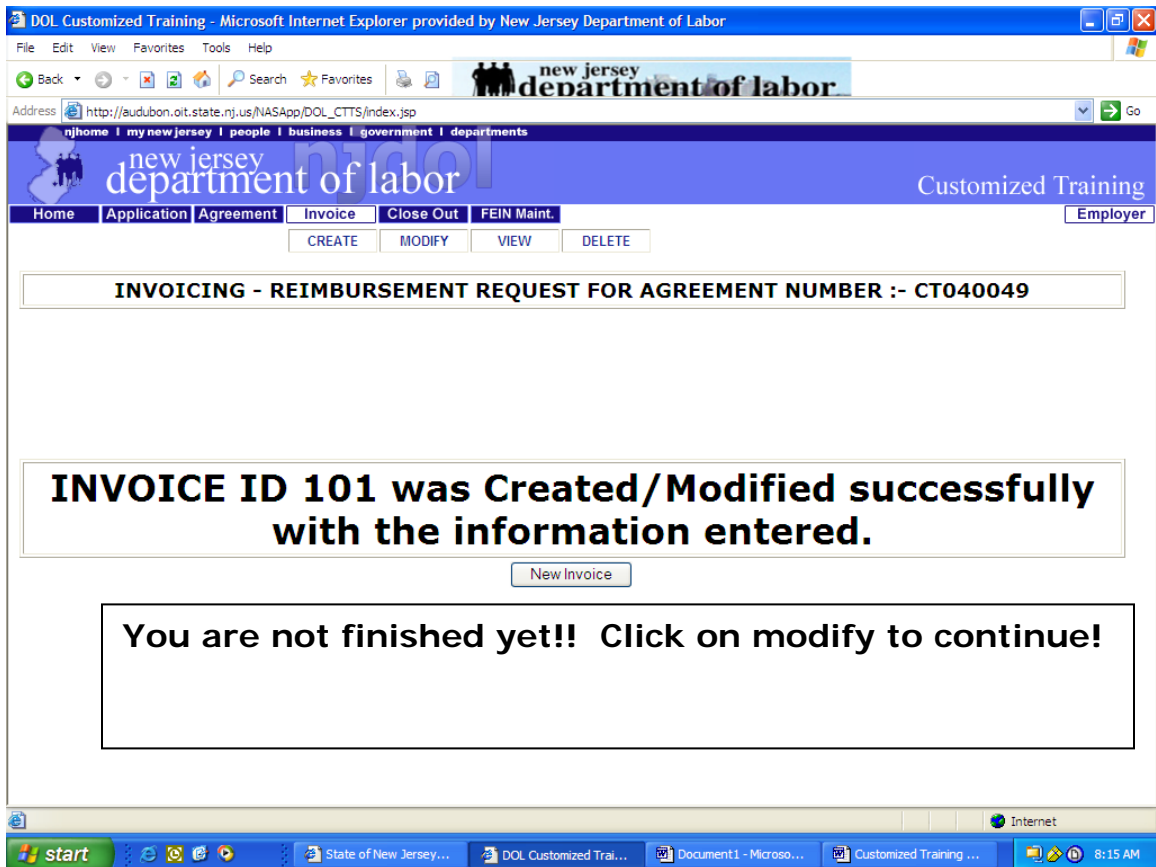
TRAINEE FIRST NAME	TRAINEE LAST NAME	TRAINEE MI	TRAINEE SSN	DATE TRAINED FROM	DATE TRAINED TO	HOURS CHARGED	HOURS REMAINING	ARTH +
Joseph	Smith		123456789	07/15/2004	07/15/2004	4	8.0	\$ 10.50
Mary	McDonald		123456780	07/15/2004	07/15/2004	8	8.0	\$ 10.50

Note: Selecting "Add Course" will repeat the above process. Only 1 session will be viewable at a time. User may also View Summary to select courses for further editing.

Buttons: Add/Modify Course, Complete/Save, View Summary, Reset values

STEP 4 – Complete/Save:

- Once all the trainee information has been entered into the system, please click on the complete/save button located on the bottom of the page unless you would like to enter in another course or session. In this case, please click on the Add/Modify button. Once completed entering in all courses, then select Complete/Save. Once you have saved the information, the following statement will appear: **INVOICE ID was Created/Modified successfully with the information entered.**



STEP 5 – CERTIFY Invoice:

- Place your pointer on the block labeled **Invoice** located at the top of the page. . This will cause a new block labeled **CREATE/MODIFY/VIEW/DELETE** to appear.
- Please select **MODIFY** from the block.
- The next screen titled “**INVOICING - REIMBURSEMENT REQUEST FOR AGREEMENT NUMBER (ADD/MOD DETAILS)**” will appear. At this point, select the invoice you wish to submit from the table and then click **Modify** button. Next, go to the bottom of the page and select **VIEW SUMMARY**. The next page which appears will summarize the invoice. To view the actual trainees in the invoice, select the course and session. Modifications can be made on this page. If the invoice looks correct, then click the **CERTIFY** button located at the bottom of the page. The invoice has now been successfully submitted to the state for reimbursement. **Remember to record Invoice ID Number for future reference.**

DOL Customized Training - Microsoft Internet Explorer provided by New Jersey Department of Labor

new jersey department of labor

Address: http://audubon.oit.state.nj.us/NASApp/DOL_CTTIS/index.jsp

Home | Application | Agreement | Invoice | Close Out | FEIN Maint. | Employer

CREATE | MODIFY | VIEW | DELETE

Agreement Num.	Agmt. Start Date	Agmt. End Date	CTR Name	Application Type	Company Name	FEIN	Agmt Amount	Avail Agmt Bal	
CT040362	1/3/05	1/2/06	Ann Lord	Emp	Employer9722	13-2499772	\$5,229.01	\$4,230.01	View Agmt Budget Summary

Invoice Id.	Invoice Amount	Location Code	Status	Invoice PKI date	Authorized Date	CFS Process Date	
686	\$0.00	00	IP				Modify Invoice
687	\$0.00	00	IP				Modify Invoice
688	\$0.00	00	IP				Modify Invoice
689	\$0.00	00	IP				Modify Invoice
690	\$0.00	00	IP				Modify Invoice
700	\$0.00	00	IP				Modify Invoice

Please select the Invoice you wish to certify.

javascript:invoiceModify()

DOL Customized Training - Microsoft Internet Explorer provided by New Jersey Department of Labor

new jersey department of labor

Home | Application | Agreement | Invoice | Close Out | FEIN Maint. | Employer

Total Amount of Calculated Reimbursement(s) (this invoice) \$ 524

NJCFS shall send the payment for this invoice to the Vendor Location Code entered below. However, if the Grantee so desires, NJCFS can send the payment of this invoice (only) to another Vendor Location Code entered here. Please check this with the Grantee. Vendor Location code (default is 00), that must be two digits, is allotted by NJ Treasury in the NJCFS Vendor System. Please ensure that the Vendor Location Code exists in NJ Treasury System.

Vendor Location Code desired by Grantee (for this payment only) 00

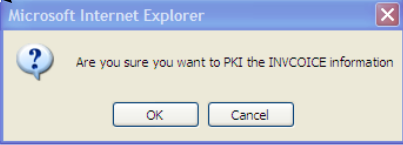
DUPLICATE Invoicer (required for Reset action on the invoice)

Certify Edit Invoice

Please review your invoice prior to proceeding with the CERTIFY process. Please click on CERTIFY Invoice.

The New Jersey Consolidated Financial System, (NJCFIS) will automatically send a payment for this invoice to the Grantee's Location they submitted their W9 information to the State of New Jersey, Department of Treasury. Generally, the payment will be sent to the location the Grantee has requested on the W9.

If you are sure, please click ok.



Certify Invoice

Edit Invoice

LWD New Jersey Department of Labor and Workforce Development **Customized Training System**

Please Enter Your Name

Certified By: First Last

Certified by is the authorized person for the grant. Enter first and last name

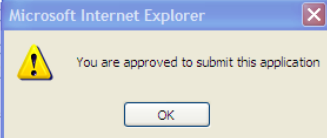
... if you are not the applicant. Please contact your Business representative before Certifying the application

Cancel Continue

INVOICING - REIMBURSEMENT REQUEST FOR AGREEMENT NUMBER :- CT060918

INVOICE ID :- 2593

Course Name: PC SKILLS - WORD PROCESSING Session: 1,400.00
 Course Type: CLASSROOM Number: 1
 Training Provider: Hudson County Community College Allowed: 8.0




RAINEE FIRST NAME	TRAINEE LAST NAME	TRAINEE SSN	TRAINED FROM	TRAINED TO	CHARGED	ARTH +	ACTUAL HOURLY WAGE	QUAL EMP CHECK
est	one	111111120	09/15/2008	09/15/2008	8.0	\$21.88	15.0	<input type="checkbox"/>

... amount payable for this course and session by OCT \$175.04 Qualified Employee Wages payable for this course \$0.00

Total Amount Payable for all the courses(this invoice) \$175.04

Certification Statement

njhome | my new jersey | people | business | government | departments



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and Workforce Development**

Customized Training System

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[Employee](#)

Course Type: Session Number:
 Training Provider: Total Hours Allowed:

(* - Allowable Reimbursement per trainee hour)

TRAINEE FIRST NAME	TRAINEE LAST NAME	TRAINEE SSN	DATE TRAINED FROM	DATE TRAINED TO	HOURS CHARGED	ARTH *	ACTUAL HOURLY WAGE	QUAL EMP CHECK
test	one	111111120	09/15/2008	09/15/2008	8.0	\$21.88	15.0	<input type="checkbox"/>

Tuition amount payable for this course and session by OCT
 Qualified Employee Wages payable for this course

Total Amount Payable for all the courses(this invoice)


Certification Statement

document or form that will be collected and maintained by the State of New Jersey. By choosing to certify and submit this information electronically, you acknowledge that you are authorized by the grantee to act in this capacity. By submission of this Customized Training Request for Reimbursement, the grantee certifies that time and attendance records that substantiate the Request for Reimbursement are on file at a grantee location and are available for review by New Jersey Department of Labor representatives upon request. The grantee also certifies that all information contained in this Request for

I Accept: YES NO

Please click on Submit and print out a copy for your records. In view invoice, your invoice should have a PK status.

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Customized Training System

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INVOICING - REIMBURSEMENT REQUEST FOR AGREEMENT NUMBER :- CT060918

INVOICE ID :- 2593

Course Name: Amt allowed per session:
 Course Type: Session Number:
 Training Provider: Total Hours Allowed:

(* - Allowable Reimbursement per trainee hour)

TRAINEE FIRST NAME	TRAINEE LAST NAME	TRAINEE SSN	DATE TRAINED FROM	DATE TRAINED TO	HOURS CHARGED	ARTH *	ACTUAL HOURLY WAGE	QUAL EMP CHECK
test	one	111111120	09/15/2008	09/15/2008	8.0	\$21.88	15.0	<input type="checkbox"/>

Tuition amount payable for this course and session by OCT
 Qualified Employee Wages payable for this course

Total Amount Payable for all the courses(this invoice)

VIEW SUMMARY PAGE DESCRIPTION

The screenshot shows a web browser window titled "DOL Customized Training - Microsoft Internet Explorer provided by New Jersey Department of Labor". The address bar shows the URL "https://www4.state.nj.us/NASApp/DOL_CCTS/index.jsp". The page header includes the "new jersey department of labor" logo and navigation links: Home, Invoice, View A1 Payments, View CFS Records, Reports, Agreement, and Invoicer. The main content area is titled "REIMBURSEMENT REQUEST FOR AGREEMENT NUMBER - CT050339 INVOICE ID - 313" and "VIEW SUMMARY". Below this, there is a note: "All Dates should be entered in mmddyyyy format" and two asterisked notes: "* - Includes all the invoices which have been PKI'd by the Applicant(Grantee) till date excluding this invoice" and "** - Includes all the invoices which have been Authorized by the OCT Invoicer till date". The form contains the following fields:

Course Name	GEN SELLING SKILLS OPERATIONS		
Course Type	CLASSROOM	Session Number	2
Training Provider	Hudson County Community	Number of Trainees	15
Amount of Tuition or Wages entered	\$ 17,297.82	Amt already Requested for this Course and Session*	\$ 0.00
Amount of allowable OCT Reimbursement for this Course and Session	\$ 17,360.00	Amount Previously Approved for this course** :	\$ 0
Amount Remaining for this course and session	\$ 17,360.00		
Amount payable to the applicant for this course and session	\$ 17297.82		

Course Name: This is the name of the course selected by the grantee for training.

Course Type: There are three types of training:

- **Classroom** - A third party vendor supplies the training at a training provider's location, or at the grantee's location. The Office of Customized Training (OCT) pays 100% of the tuition cost, up to the limits set by OCT.
- **In-house Classroom** - Training is provided by an employee of the company at company's location. OCT pays 25% of the wages of employee during the hours the employee is being trained.

- **On-the-Job-Training (OJT)** - Training is provided to employees during production. OCT pay 25% of the wages of the employee during the hours the employee is being trained.

Training Provider: The training provider is the person, company or college providing the training to a company requesting training.

- If the company is requesting Classroom Training, the third party training provider name will be displayed.
- If the company is requesting In-house or On-the-Job training, the Training Provider field will display “Self.”

Amount of Tuition or Wages entered:

- If the amount entered is for tuition, this field displays a calculation which represents the number of trainees, times the number of actual training hours times the allowable reimbursement per trainee-hour (ARTH). The ARTH figure shows in the budget for each course in the application.
- If the amount entered is for wages, this field displays a calculation which represents the number of trainees, times the number of actual training hours, times the actual wage.

If the training is for classroom training third party, OCT will only reimburse the amount allowed for each session even though the system may display a number that exceeds the OCT Allowable Reimbursement. **Please refer to the field “Amount payable to the applicant for this course and session” for the actual reimbursement figure.**

If the training is for In-house or On-the-Job, the system will not allow the applicant to exceed the OCT allowable reimbursement amount.

Amount of allowable OCT Reimbursement for this Course and Session: This field shows the amount allowed per course session. For example, a course that has two sessions for a total of \$2,000.00 would show \$1,000.00 in this field representing a \$1,000.00 per session.

Amount Remaining for this Course and session: This figure represents what is remaining for this course, not including the current invoice. For example, if the applicant has \$2,000.00 allotted for a particular course or session, and they are currently invoicing for a course or session in the amount of \$1,000.00, the \$1,000.00 being requested will not show on the invoice in this field until after the applicant has electronically signed this invoice. Once the applicant Certifier’s this invoice, the system will then show a \$1,000.00 in the remaining balance, leaving a \$1,000.00 available for future invoicing.

Amount payable to the applicant for this course and session : This is the actual total amount of OCT reimbursement for this course and session.

Session Number: This field represents the session number being submitted for payment, e.g. session #1.

Number of Trainees: This is the number of trainees entered for this invoice. This is an important figure when entering Classroom third party training with multiple sessions. The system is designed to divide trainees by sessions. **If the grant is designed to have two sessions with a total of twenty trainees, the system will be looking for ten trainees in each session for billing purposes.** Trainees can be divided equally on an invoice provided that the training date matches actual training.

Amount already requested for this Course and Session:

- If the training is for Classroom third party training, the amount displayed in this field indicates any signed, invoices for this particular course and session. It does not include the invoice the grantee is currently working on.
- If the training is for In-house training or On-the-Job training, the amount displayed in this field indicates any signed invoices for this particular course. The amount displayed represents the entire amount available for the course. The system does not check against the sessions.

Amount previously Approved for this Course: This is the total of all invoices that have been requested by the applicant for payment and approved by the OCT Invoice Administrator.

The screenshot displays the 'DOL Customized Training' web application in Microsoft Internet Explorer. The browser address bar shows the URL: https://www4.state.nj.us/NASApp/DOL_CCTS/index.jsp. The page header includes the New Jersey Department of Labor logo and the text 'Customized Training'. A navigation menu contains links for Home, Invoice, View A1 Payments, View CFS Records, Reports, Agreement, and Invoicer. The main content area features a table with the following data:

Amount payable to the applicant for this course and session	\$ 17297.82
Amount for Classroom Training (this invoice) entered by applicant	\$ 17,298.00
Amount for OJT Training (this invoice) entered by the applicant	\$ 0.00
Total Reimbursement Amount entered by the applicant(this invoice)	\$ 17,298.00
Total Payable Amount for all the courses(this invoice)	\$ 17,297.82

Below the table, there is a section for payment instructions:

NJCSF shall send the payment for this invoice to the Vendor Location Code entered below. However, if the Grantee so desires, NJCSF can send the payment of this invoice (only) to another Vendor Location Code entered here. Please check this with the Grantee. Vendor Location code (default is 00), that must be two digits, is allotted by NJ Treasury in the NJCSF Vendor System. Please ensure that the Vendor Location Code exists in NJ Treasury System.

Fields for input include:

- Vendor Location Code desired by Grantee (for this payment only):
- PP Exempt(for this payment only):
- Comments by OCT Invoicer (required for Reset action on the invoice):

The Windows taskbar at the bottom shows the Start button, several open applications (Inbox - Microsoft Out..., Invoicing description..., State of New Jersey..., DOL Customized Tra...), and the system clock at 3:55 PM.

Amount for Classroom Training (this invoice) entered by applicant:

If the training is classroom third party training, this field displays a calculated number which represents the total number of trainees, times the allowable reimbursement per training hour, (ARTH), times the number of training hours.

If the training is In-house training, this field displays a calculated number which represents the total number of trainees times the trainee's actual wage, times the number of trainee hours times 25%.

The total displayed in this field does not represent the OCT Allowable reimbursement.

Amount for OJT Training (this invoice) entered by the applicant: This field displays the total of all OJT training courses that were entered by the grantee and appear in this invoice. The total is a calculation of the total number of trainees, times the trainee's actual wage, times the number of trainees hours, times 25%.

The total displayed in this field does represent the OCT Allowable reimbursement.

Total Reimbursement Amount entered by the applicant (this invoice): This is the grand total of all Classroom third party, In-house and OJT training combined that the grantee has entered into this particular invoice.

Total Payable Amount for all the courses (this invoice): This field displays the amount of the OCT Allowable Reimbursement which will be paid to the grantee for all Classroom, In-house and OJT training combined on this particular invoice.

CLASSROOM TRAINING

UNDERSTANDING SESSIONS

A session represents the total number of times an entire course will be held. It does not represent the number of times each individual class will meet. Each session should be developed to contain a minimum of 10 trainees.

Important: When invoiced, trainees must be divided equally among sessions. Certain numbers cannot be divided equally. Example 1 and Example 2 show two ways to invoice when number of trainees cannot be divided evenly among sessions.

EXAMPLE 1

Name of Course:		How to Calculate Sessions
Total Number of Trainees:		25
Number of Sessions:	2	
Number of Hours per Session:		8
Tuition Cost per Session:		\$1,600

OCT Contribution:	\$3,200	(\$1,600 x 2)
Allowable Reimbursement per Trainee Wage:	\$16.00	(\$3,200/ 25/ 8)

This course will be taught in two sessions. Each session will contain a minimum of 10 trainees. Each individual trainee will receive 8 hours of training. Training classes can be held at anytime during the contract period.

Important: No training may be conducted after the contract end date.

• **Session 1**

Number of Trainees:	12
Classes Held:	Monday & Wednesday
Total Training Hours:	8 {2 hours per day –4 hours per week – 2 weeks total}

• **Session 2**

Number of Trainees:	13
Classes Held:	Tuesday & Thursday
Total Training Hours:	8 {1 hour per day – 2 hours per week – 4 weeks total}

Although the two sessions are held at different times, they cover the same material and each individual will receive a total of 8 hours of training. If an individual is unable to complete a particular training session the employer is permitted to make a substitution. The substitute must pick up where the removed individual left off.

Important: Please keep accurate attendance records including names, social security numbers and number of hours completed. These records are needed for invoicing procedures. The CTTS program uses social security numbers to identify training hours. It will not allow users to enter a person who has already maximized their hours. CTTS will allow having different training dates for sessions.

EXAMPLE 1

• **Session 1**

Number of Trainees:	12
Cost per Session:	\$1,600
Total Training Hours:	8
Allowable Reimbursement per Trainee Wage:	\$16.00

Requested Reimbursement: **\$1,536** (\$16.00 ARTH x 12 Trainees x 8 Hours)

Allowable Reimbursement: \$1,536

• **Session 2**

Number of Trainees:	13
Cost per Session:	\$1,600
Total Training Hours:	8
Allowable Reimbursement per Trainee Wage:	\$16.00

Requested Reimbursement: \$1,664 (\$16.00 ARTH x 13 Trainees x 8 Hours)

Allowable Reimbursement: \$1,600

Note: Reimbursement cannot exceed Cost per Session.

“Amount requested for reimbursement \$1,664 (calculated reimbursement) cannot be greater than the allowable OCT per session \$1,600 (cost per session). Do you wish to continue?” Click “Yes”

Invoice Summary

- Session 1: \$1,536
- Session 2: \$1,600

Total Invoice Payment: \$3,136

EXAMPLE 2

• **Session 1**

Number of Trainees: 13
Cost per Session: \$1,600
Total Training Hours: 8
Allowable Reimbursement per Trainee Wage: \$16.00

Requested Reimbursement: \$1,536 (\$16.00 ARTH x 12 Trainees x 8 Hours)
\$ 64 (\$16.00 ARTH x 1 Trainee x 4 Hours)

Allowable Reimbursement: \$1,600

• **Session 2**

Number of Trainees: 13
Cost per Session: \$1,600
Total Training Hours: 8
Allowable Reimbursement per Trainee Wage: \$16.00

Requested Reimbursement: \$1,536 (\$16.00 ARTH x 12 Trainees x 8 Hours)

\$ 64 (16.00 ARTH x 1 Trainee x 4 Hours)
Allowable Reimbursement: \$1,600

Invoice Summary

- Session 1: \$1,600
- Session 2: \$1,600

Total Invoice Payment: \$3,200

DOL Customized Training - Microsoft Internet Explorer provided by New Jersey Department of Labor

new jersey department of labor

Address: http://audubon.oit.state.nj.us/NASApp/DOL_CCTS/index.jsp

Home | Application | Agreement | Invoice | Close Out | FEIN Maint. | Employer

Course Type: CLASSROOM Session Number: 1

Training Provider: AGC/Edu Foundation Total Hrs allowed: 8.0

* - Allowable Reimbursement per trainee hour
(All Dates to be entered in mmdyyyyy format)
(** Trainee entry will be discarded without a valid trainee SSN)

TRAINEE FIRST NAME	TRAINEE LAST NAME	TRAINEE MI	TRAINEE SSN	DATE TRAINED FROM	DATE TRAINED TO	HOURS CHARGED	ARTH *
electrician	one		111111101	09/27/2004	09/27/2004	8.0	\$ 16.67
electrician	two		111111102	09/27/2004	09/27/2004	8.0	\$ 16.67
electrician	three		111111103	09/27/2004	09/27/2004	8.0	\$ 16.67
electrician	four		111111104	09/27/2004	09/27/2004	8.0	\$ 16.67
electrician	five		111111105	09/27/2004	09/27/2004	8.0	\$ 16.67
electrician	six		111111106	09/27/2004	09/27/2004	8.0	\$ 16.67
electrician	seven		111111107	09/27/2004	09/27/2004	8.0	\$ 16.67
helper	one		111111181	09/28/2004	09/28/2004	4.0	\$ 16.67

View Another Invoice View Summary

DOL Customized Training - Microsoft Internet Explorer provided by New Jersey Department of Labor

new jersey department of labor

Address: http://audubon.oit.state.nj.us/NASApp/DOL_CCTS/index.jsp

Home | Application | Agreement | Invoice | Close Out | FEIN Maint. | Employer

Course Type: CLASSROOM Session Number: 2

Training Provider: AGC/Edu Foundation Total Hrs allowed: 8.0

* - Allowable Reimbursement per trainee hour
(All Dates to be entered in mmdyyyyy format)
(** Trainee entry will be discarded without a valid trainee SSN)

TRAINEE FIRST NAME	TRAINEE LAST NAME	TRAINEE MI	TRAINEE SSN	DATE TRAINED FROM	DATE TRAINED TO	HOURS CHARGED	ARTH *
helper	one		111111121	09/28/2004	09/28/2004	4.0	\$ 16.67
helper	two		111111122	09/28/2004	09/28/2004	8.0	\$ 16.67
helper	three		111111123	09/28/2004	09/28/2004	8.0	\$ 16.67
helper	four		111111124	09/28/2004	09/28/2004	8.0	\$ 16.67
helper	five		111111125	09/28/2004	09/28/2004	8.0	\$ 16.67
helper	six		111111126	09/28/2004	09/28/2004	8.0	\$ 16.67
helper	seven		111111127	09/28/2004	09/28/2004	8.0	\$ 16.67
helper	eight		111111128	09/28/2004	09/28/2004	8.0	\$ 16.67

View Another Invoice View Summary

As suggested, it is best to have trainees and sessions evenly distributed. For example, if a grantee has twenty trainees and wants to have two sessions, the grantee should train ten trainees in session one and train ten trainees in session two. In the case where a grantee cannot evenly distribute their training, the above invoices illustrate how to invoice to receive the maximum budgeted amount. Grantees must invoice as training occurred. DATES MUST MATCH ACTUAL TRAINING DATE.

In the above screen print, the grantee's course was divided into two sessions with fifteen trainees. To avoid exceeding the allowable amount per session, the grantee can split the hours in half of a trainee and place that trainee in both invoices/sessions. The training date must be the actual date of training. In the example, "helper one" trained on 9/28/2004. The grantee invoiced four hours on session one and four hours on session two.

In the below example, the grantee contracted for twenty trainees and two sessions at \$1,000.00 per session. For invoicing purposes, trainees should be divided evenly by sessions. In this example, there are ten trainees on each invoice. DATES MUST MATCH ACTUAL TRAINING DATE. Note in Example 1 "Electrician ten" trained on 9/28/2004 and the balance of the trainees trained on 9/27/2004. The second example invoice shows all the trainees that trained on 9/28/2004. If the grantee had billed for eleven on one invoice, he would have exceeded his session amount by \$100.00.

TRAINEE FIRST NAME	TRAINEE LAST NAME	TRAINEE MI	TRAINEE SSN	DATE TRAINED FROM	DATE TRAINED TO	HOURS CHARGED	HOURS REMAINING	ARTH *
electrician	one		111111101	09/27/2004	09/27/2004	8.0	0	\$12.5
electrician	two		111111102	09/27/2004	09/27/2004	8.0	0	\$12.5
electrician	three		111111103	09/27/2004	09/27/2004	8.0	0	\$12.5
electrician	four		111111104	09/27/2004	09/27/2004	8.0	0	\$12.5
electrician	five		111111105	09/27/2004	09/27/2004	8.0	0	\$12.5
electrician	six		111111106	09/27/2004	09/27/2004	8.0	0	\$12.5
electrician	seven		111111107	09/27/2004	09/27/2004	8.0	0	\$12.5
electrician	eight		111111108	09/27/2004	09/27/2004	8.0	0	\$12.5
electrician	nine		111111109	09/27/2004	09/27/2004	8.0	0	\$12.5
electrician	ten		111111110	09/28/2004	09/28/2004	8.0	0	\$12.5

TRAINEE FIRST NAME	TRAINEE LAST NAME	TRAINEE MI	TRAINEE SSN	DATE TRAINED FROM	DATE TRAINED TO	HOURS CHARGED	ARTH *
electrician	eleven		111111111	09/28/2004	09/28/2004	8.0	\$12.5
electrician	twelve		111111112	09/28/2004	09/28/2004	8.0	\$12.5
electrician	thirteen		111111113	09/28/2004	09/28/2004	8.0	\$12.5
electrician	fourteen		111111114	09/28/2004	09/28/2004	8.0	\$12.5
electrician	fifteen		111111115	09/28/2004	09/28/2004	8.0	\$12.5
electrician	sixteen		111111116	09/28/2004	09/28/2004	8.0	\$12.5
electrician	seventeen		111111117	09/28/2004	09/28/2004	8.0	\$12.5
electrician	eighteen		111111118	09/28/2004	09/28/2004	8.0	\$12.5
electrician	nineteen		111111119	09/28/2004	09/28/2004	8.0	\$12.5
electrician	twenty		111111120	09/28/2004	09/28/2004	8.0	\$12.5

On the Job/In House Training

Formula for OTJ.

Actual wage X #of hrs. X #of students X 25%= Total requested reimbursement.

- On the Job/In-house training is not session driven.
- Client must enter actual wage.

Invoice example:

Total trainees are ten. Total requested reimbursement-\$1275.00

Invoice #652: Note in this invoice billing is **not for all ten**. Client can submit as many invoices as they choose as long as client does not go over OCT budget. It is important to make sure training dates are actual dates. This is for audit purposes.

INVOICE ID :- 652

PLEASE SELECT A COURSE NAME AND A SESSION NUMBER TO EDIT DETAILS.
 (Note: This is a data entry screen for grantee.Data to be sorted by: Classroom, Classroom-Emp, OJT.)
 Requests will be entered one at a time, as selected by the User.

Course Name: Agricultural Power Machinery Operator (SELF)

Course Type: CLASSROOM Session Number: 1

Training Provider: SELF Total Hrs allowed: 20.0

(All Dates to be entered in mmd/yyyy format)
(- Allowable Reimbursement per trainee hour)*
*(** Trainee entry will be discarded without a valid trainee SSN)*
*(*** Hourly wage is the calculated average per trainee for third party training sessions)*

TRAINEE FIRST NAME	TRAINEE LAST NAME	TRAINEE MI	TRAINEE SSN	DATE TRAINED FROM	DATE TRAINED TO	HOURS CHARGED	HOURS REMAINING	ARTH *
trainee	one		000000001	12/27/2004	12/27/2004	20.0	0	\$ 15.75
trainee	two		000000002	12/27/2004	12/27/2004	20.0	20	\$ 12.75
trainee	three		000000003	12/27/2004	12/27/2004	20.0	20	\$ 14.50

On this invoice, client will be reimbursed \$215.00. (Hrs X actual wage X 25% = Reimbursement.) Additional invoices can be submitted until amount of \$1275 OCT budget is reached.

Reminder/Note: Multiple courses and sessions can be placed on the same invoice. User can limit the number of invoices to be processed by placing them on the same invoice.

Warning! In classroom training, do not enter everyone in one session unless there was only one session. Invoicing must represent as it occurred.