



Cowlitz County Health and Human Services

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WEBSITE: www.co.cowlitz.wa.us/hhs

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 Environmental Health Unit: 207 4th Avenue North Kelso, WA 98626 OMSeptic@cowlitzwa.gov

Contractor Toolkit

Overview

This toolkit is intended to provide guidelines related to contracting with Cowlitz County Health & Human Services (CCHHS). CCHHS is regularly audited and reviewed by other governmental entities including the WA State Dept. of Commerce, the WA State Dept. of Health, the WA State Dept. of Social and Health Services, the WA State Health Care Authority, and the WA State Auditor’s Office. As a result, CCHHS must follow various guidelines and in turn must pass those same guidelines down to its contractors. New contractors will be given an orientation to contracting with CCHHS. During that orientation, the contents of this toolkit will be reviewed along with the actual contract or grant agreement itself. This will be the contractor’s opportunity to ask questions before submitting the first invoice.

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Risk Assessment

Before entering into a contract, CCHHS will utilize a risk assessment tool to evaluate financial and programmatic risk associated with all contractors. The risk assessment will help determine the level of documentation required and the frequency of monitoring needed to ensure contractor compliance with rules and requirements of contracts, programs, and funding. An example of a risk assessment tool is shown in [Appendix A](#) and is also available on the CCHHS Contractor Information webpage at www.co.cowlitz.wa.us/cchhscontractors.

CCHHS does everything possible to prevent waste, fraud and abuse of funds. CCHHS will obtain certain information from contractors to determine if a debarment or suspension has taken place that would exclude the contractor from receiving certain funds. Information requested will include, but not be limited to a Taxpayer Identification Number (TIN), a Unique Entity Identifier (UEI) number, and a Unified Business Identifier (UBI) number.

Use of Funds

Programs guidelines for use of funds vary greatly between different contracts and services. Depending on the situation, allowable costs will be listed in the contract, in CCHHS program guidelines, or in state or federal program guidelines. Contractors may only request reimbursement for costs as described in the contract or program guidelines unless approved in advance, in writing, by CCHHS. If the contractor is unsure that a cost will be allowable, they should reach out to CCHHS for more information and for approval.

Double-Dipping

CCHHS will not pay for costs that have been paid by other funding sources or fees, aka “double-dipping”. If a cost is found to have been paid by another source(s), payback of those costs will be required. Double-dipping could also result in a change in contractor risk level or termination of a contract.

Research and Development (R&D)

Funds cannot be utilized for research and development (R&D) purposes unless explicitly specified in a contract or in program guidelines.

Wages and Benefits

The contractor must have a method for tracking time for staff that work in multiple programs. CCHHS is not able to reimburse solely based on the cost of an employee’s FTE, or a portion thereof. For example, if the employee of a contractor is assigned to work 50% of their time under a CCHHS contract, billing for a flat 50% of the employee’s salary is not allowed. Any employee billing time to a CCHHS contract must have a timesheet where hours worked are tracked by program as shown in [Appendix B](#). This example and a spreadsheet template are also available on the CCHHS Contractor Information webpage at www.co.cowlitz.wa.us/cchhscontractors.

Contractors may be reimbursed for staff leave time (vacation, sick, holiday, etc.), proportionate to hours worked in the program, as long as the funding source or program guidelines do not indicate otherwise.

Costs may be billed directly as labor/salaries, or they may be included in administrative or overhead cost calculations depending on the funding source or program guidelines.

Overtime will not be reimbursed unless the individual spent 100 percent of their time on contractually allowable work in the 40-hour week.

Travel and Training

Travel and training costs may only be billed to CCHHS as described in contracts or with written preapproval. A written request by email from the contractor must be made to CCHHS, and then approved by CCHHS before travel occurs. Cost for travel or training billed after travel has occurred without approval in advance will not be reimbursed. For preapproved travel, CCHHS cannot reimburse for preregistration for conferences or training until after the travel has occurred. Costs for meals will be reimbursed at per diem rates for the geographical area of the travel and as indicated in the Cowlitz County travel policy. The Cowlitz County travel policy is available on the Board of County Commissioners webpage: <https://www.co.cowlitz.wa.us/166/Board-of-Commissioners>.

Timing of Reimbursement of Costs

CCHHS will not pay for costs that are incurred prior to the effective date or after the end date of a contract or grant agreement. Occasionally, the initial processing of contracts is delayed due to timing of county or contractor board meetings or issues with the availability of authorized signatories. CCHHS will work with contractors to determine the best course of action for reimbursement of costs in these scenarios.

Payback of Costs after Reimbursement

Because CCHHS is audited and reviewed by several governmental entities, if an audit or review occurs and it is determined that a cost was not allowed or was incorrectly billed or paid, contractors will be required to payback CCHHS for such costs. If CCHHS suspects that fraud or loss of public resources has occurred, the suspected fraud or loss will be reported as required by law to the Cowlitz County Auditor, the WA State Auditor's Office, legal counsel, and local or state law enforcement, depending upon the circumstances.

Miscellaneous

Gift Cards are not an allowable cost unless stated in the statement of work or specific CCHHS/state/federal program guidelines.

Budgets

Changes to Contract Budgets

All changes to contract or grant budgets must be preapproved in writing. This includes approval to move funds from one budget line to another, even if the maximum amount is not changing. A written request by email must be made from the contractor to CCHHS, and approved by CCHHS, before costs can be incurred. CCHHS will not reimburse contractors for expenses that were not preapproved.

Spending Plans

If a contractor has an allocation of funding that is intended to last a certain period of time, but the contractor spends the entire allocation of funding prior to the end of the contract, CCHHS will not cover the additional costs and the contractor should not expect to ask CCHHS for additional funding. Example: A contract allocates funding for a 12-month period of time but all of the funds are spent in the first three months. CCHHS will not allocate additional funds to the contractor.

There may also be times that it is appropriate for funding to be fully expensed before the end of a contract. CCHHS will work with contractors to determine if a spending plan should be in place to ensure funding is not spent too quickly or if it can be spent out prior to the end of a contract.

Administrative/Overhead Costs

Administrative or overhead costs are costs for activities that support an organization as a whole rather than any particular program or project. These are not costs associated with the delivery of program services, but they are essential costs of maintaining and managing an organization through which program services are delivered. These costs

may include IT services, general office supplies, finance and accounting costs, rent, utilities, severance pay, and staff leave time (vacation, sick, holidays, etc.). Costs must be allowable, reasonable, and consistent with all of activities of an organization.

Administrative or overhead costs may only be billed to CCHHS as indicated in the approved budget/spending plan.

If applicable, contractors receiving federal funds who have a federally negotiated cost indirect rate or allocation plan must submit information to CCHHS finance staff.

If Administrative or overhead costs are allowed, the contractor will be required to disclose the methodology for costs. The methodology must be a written plan that documents why and how the contractor allocates administrative or overhead costs. It should include relevant, up-to-date information about overhead costs and how they are allocated across the organization. An example cost allocation worksheet is shown in [Appendix G](#). This example and a spreadsheet template are available on the CCHHS Contractor Information webpage at www.co.cowlitz.wa.us/cchhscontractors.

Invoices

Format

All invoices sent to CCHHS will be made in a format acceptable to CCHHS. All invoices must be signed by the contractor prior to submission to CCHHS. Under certain circumstances, CCHHS may provide an invoice in a specific format due to funding or audit requirements. If a specific invoice is not provided by CCHHS, the contractor may utilize a standard invoice as shown in [Appendix C](#). This example and a spreadsheet template are also available on the CCHHS Contractor Information webpage at www.co.cowlitz.wa.us/cchhscontractors.

Method of Submission, Frequency, and Due Dates

Invoices must be submitted monthly, at a minimum, unless otherwise stated in a contract. Invoices received after deadlines set forth in contracts will not be paid by CCHHS. Deadlines may be subject to change based state or federal guidelines.

Invoices may be submitted by mail, in person at CCHHS, or by email to hhsaccounting@cowlitzwa.gov. Some programs may have requirements to submit information through a secure file upload system as indicated in contract.

Back-up Documentation

Depending on the pre-determined risk level and/or the requirements of specific funding, costs billed to CCHHS may require back-up documentation in the form of invoices, timesheets, cancelled checks, itemized receipts, etc. An example of an itemized receipt is shown in [Appendix D](#). If costs are split between multiple projects or programs, documentation showing how the cost was split between funding sources or programs will be required.

Regardless of the contractor risk level, CCHHS will require full back-up documentation for the first billing period. This will ensure the contractor understands what may be required throughout the contract. If CCHHS determines full back-up documentation does not need to be submitted with every invoice, it may be requested at any time.

[Appendix E](#) provides a list of suggested documentation to be used to prove costs.

Even if backup is not required to be submitted with each invoice, contractors must keep proof of costs on file for the amount of time specified in the contract. This length of time will vary based on the funding source.

Wages and Benefits

When billing for cost of wages and benefits, back-up documentation will be required in the form of employee timesheets as shown by example in [Appendix B](#). This example and a spreadsheet template are also available on the

CCHHS Contractor Information webpage at www.co.cowlitz.wa.us/cchhscontractors. Back-up documentation should include the employee's name, position description, salary/benefits paid, and dates/hours worked. Employee time must be billed for the month the hours are worked, not when payroll posts.

Contractors will be asked to provide an explanation of how employee time is tracked in relation to individual projects or programs. If employee timesheets are not available, contractors will need to work with CCHHS to determine if a general ledger printout as shown in [Appendix H](#) will be sufficient documentation.

Miscellaneous

- Remove/redact any client information (names, initials) from invoices. Use different client identifier when required (HMIS #, ADSA Client ID, etc.)
- Costs of membership in civic, business, technical, or professional organizations will generally not be eligible for reimbursement.
- When in doubt, ask in advance before submitting an invoice.
- Include the email approval from CCHHS staff when a cost was approved under a general category.
- Invoices are always paid on a cost reimbursement basis, unless otherwise noted in advance in a contract.
- CCHHS will make every effort to pay invoices no more than 30 days after receipt of a complete and accurate invoice packet. Under no circumstances will an invoice be paid without proper back-up documentation.

Audits/Monitoring of Costs

As required by state and local guidelines, CCHHS must audit or do periodic reviews of invoices including back-up documentation, as well as conformance with programmatic guidelines. At the beginning of a contract, CCHHS will provide the contractor with an overview of the monitoring process and a tentative schedule of when monitoring will be performed. CCHHS uses monitoring tools that serve as a guide or checklist when performing audits of contractors. The contents of monitoring tools vary based on the funding source. An example of a monitoring tool is shown in [Appendix F](#). Prior to the scheduled date of an audit, CCHHS will remind contractors of the upcoming monitoring and provide a copy of the applicable monitoring tool.

While routine monitoring is scheduled for specific dates, CCHHS may reach out to a contractor at any time for information. This may be due to a state agency request related to the funding. The contractor will be expected to submit information as requested at the timelines indicated by the state agency performing the auditing.

Depending on the source of funding, costs associated with contract monitoring during the contract period may be an allowable costs and be billable to a contract. Costs associated with contract monitoring, state audits, and/or payback of funds after the contract period has ended, are not allowable costs, and will be the responsibility of the contractor.

Programmatic Reporting

CCHHS must follow various reporting schedules and guidelines and in turn must pass those same guidelines down to its contractors.

Program reporting requirements vary greatly between different contracts and services. Depending on the program, information related to reporting schedules, reporting format, and method of submission may be listed in the contract, in CCHHS program guidelines, or in state or federal program guidelines.

Regardless of timeliness of invoice submission, reimbursement will not be made if complete and accurate program reports have not been received by CCHHS.

Appendix A

Risk Assessment Tool Example (Example only, risk assessment tool may vary)



Cowlitz County Health and Human Services

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Risk Assessment

Contractor Name: _____ Project Name: _____
 Contract Number: _____ Funding Source: _____
 Contractor's EIN: _____ Date: _____
 Contractor's SAM UEI (formerly DUNS): _____ Conducted by: _____

#	Risk Factors	Yes/No	Score	Comments
1	Debarment Certification Verified			
2	Has the County contracted with this provider before?			
	If yes above, have there been any previous contracting issues?			
3	Is this contract a renewal contract for the same services?			
4	Is the contract amount over \$100,000?			
5	Has the entity been in business for more than 3 years?			
6	Does the provider have more than 3 years of experience with this type of work?			
7	Has the provider had reorganization with financial or program staff in the last 12 months?			
8	Has the provider had any contracts terminated in the last 24 months because of performance or compliance issues?			
9	Has the provider administered federal, state, or local government funds in the past?			
10	Does the contract include federal funds?			
	If so, does their most recent single state audit include findings?			

Example Only

Score:

Risk Level <i>Low, Medium, High</i>	Level of subrecipient monitoring	
	Review source documents from 3 random months during the contract period to verify expenditures	Scored 10-18
	Review source documents from 6 random months during the contract period to verify expenditures	Scored 19-29
	Review source documents each month of the contract period prior to reimbursement	Scored 30+

Appendix B

Timesheet Example

Employee Project Timesheet								
Employee Name								
Pay Period	5/1/2023 - 5/14/2023							
Projects	Monday 5/1/2023	Tuesday 5/2/2023	Wednesday 5/3/2023	Thursday 5/4/2023	Friday 5/5/2023	Saturday 5/6/2023	Sunday 5/7/2023	Project Totals
Project A		0.75	0.25					1.00
Project B		7.25	4.75	4.00	2.00			18.00
Project C			3.00	4.00	2.00			9.00
Vacation	8.00				4.00			12.00
Daily Totals	8.00	8.00	8.00	8.00	8.00	0.00	0.00	40.00
								Weekly Total
Projects	Monday 5/8/2023	Tuesday 5/9/2023	Wednesday 5/10/2023	Thursday 5/11/2023	Friday 5/12/2023	Saturday 5/13/2023	Sunday 5/14/2023	Project Totals
Project A	1.00	0.50	0.50		0.50			2.50
Project B	2.00	3.50	4.50		5.00			15.00
Project C	5.00	4.00	3.00		2.50			14.50
Sick				8.00				8.00
Daily Totals	8.00	8.00	8.00	8.00	8.00	0.00	0.00	40.00
								Weekly Total

Example Only

Appendix D

Itemized Receipt Example

An itemized receipt details *exactly* what was purchased and/or consumed. A simple credit card receipt is not sufficient documentation for reimbursement.

<p align="center">ITEMIZED RECEIPT: ACCEPTABLE</p> <p align="center">(Reimbursement allowed subject to per diem, tip, and other guidelines)</p>	<p align="center">NOT AN ITEMIZED RECEIPT: NOT ACCEPTABLE</p> <p align="center">(No reimbursement allowed)</p>
	
<p>Why this <u>is</u> reimbursable:</p> <p>The food was listed with a description, a time and date, a location, a per unit cost, tax, etc.</p>	<p>Why this is <u>not</u> reimbursable:</p> <p>The food is not listed, and there is not a per unit cost, tax, etc.</p>

Appendix E

List of Suggested Back-up Documentation

Expense	Suggested Documents to Prove Costs
Program operations such as space rent, utilities, office phone, IT services, etc.	Copy of invoice containing vendor name, description, dates of service, amounts including taxes and fees
Cell Phone Needed for Contract Scope of Work	Copy of invoice containing staff name, position or phone number, vendor, description, dates of service, amounts including taxes and fees
Client rent, utilities, deposit, etc.	Invoices, rental agreements containing vendor name, client ID (if applicable), description, dates of service, amount
Amazon purchases, store purchases, etc. (i.e. Fred Meyer, Walmart)	Itemized receipts. Credit card statement cannot be used in lieu of an itemized receipt
Travel/Training	<p>All trainings require an agenda as backup. The agenda is required to show when meals were provided.</p> <ul style="list-style-type: none"> • Cannot be billed until the training takes place • Log that includes date, location, number of miles, program • MapQuest is required showing mileage to and from locations • Reimbursed at current IRS mileage rate • Meals will be reimbursed at U.S. General Services Administration rates which are available online: https://www.gsa.gov/travel/plan-book/per-diem-rates • Meals provided as part of a convention seminar, lodging package, or included in a registration fee are not eligible for separate reimbursement as travel expenses • Itemized receipts are required for travel costs (plane, train, car rental, hotel, etc.)

Appendix F

Monitoring Tool Example (Example only, actual monitoring tool may vary)



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Contractor Monitoring Tool

Contractor Name:

Contract Number:

Contractor's EIN:

Contractor's SAM UEI (formerly DUNS):

Project Name:

Funding Source:

Date:

Conducted by:

Monitoring Questions	Yes/No	Comments
FISCAL		
Invoice Review - Invoice Date _____		
Is there program income received from this program? (Gross income received by the grantee directly generated by the grant supported activity.)		
Are there sufficient records to identify the amount of program income received and how it was spent?		
Are other funding resources utilized to pay the cost of services?		
What system is in place to ensure the prevention of duplicative funding for services paid for by the County?		
Are salaries/wages supported by monthly time and attendance records?		
Are time and attendance records supported by adequate documentation?		
If the staff assigned to work on the County funded programs work on other programs, how do you ensure that costs are allocated correctly?		
CLIENT RECORDS		
Is client information complete, including all applicable identifiers as required in the program guidelines?		
Based on program requirements, information may include client ID, first name, last name, DOB, address.		
Have client eligibility requirements been met and documented?		
Can amount requested be verified with applicable documentation?		
Was applicable documentation of need included based on program guidelines?		

Appendix F (continued)

Monitoring Tool Example (continued)

DATA SECURITY		
Are policies and procedures documented governing access to systems with the shared Data?		
Is access restricted through administrative, physical and technical controls to authorized staff only?		
Are user accounts unique and that any given user account logon ID and password combination is known only to the one employee to whom that account is assigned?		
Is it possible to determine which employee performed a given action on a system housing the Data based solely on the logon ID used to perform the action?		
Are only authorized users are capable of accessing the Data?		
Are there controls in place to ensure an employee's access to the Data is removed immediately?		
Upon suspected compromise of the user credentials.		
When their employment, or the contract under which the Data is made available to them, is terminated.		
When they no longer need access to the Data to fulfill the requirements of the contract.		
Is there a process in place to periodically review and verify that only authorized users have access to systems containing OSH's confidential information.		
When accessing Data from within the Contractor's network are there password and logon requirements for users within the Contractor's network, including:		
A minimum length of 8 characters, and containing at least three of the following character classes: uppercase letters, lowercase letters, numerals, and special characters such as an asterisk, ampersand, or		
Passwords do not contain a user's name, logon ID, or any form of their full name.		
Passwords do not consist of a single dictionary word. A password may be formed as a passphrase which consists of multiple dictionary words.		
Passwords are significantly different from the previous four passwords. Passwords that increment by simply adding a number are not considered significantly different.		
CORRECTIVE ACTION		

Example Only

Appendix G

Cost Allocation Example

Overhead Cost Allocation: Acme Agency										
For the time period: 1/1/2023-1/31/2023										
Basis for expenditures to be allocated to programs based on the NUMBER OF FULL TIME EMPLOYEES (FTE) in individual programs as of the date of this plan.	Program A - FTE	Program B - FTE	Program C - FTE	Program D - FTE	Agency Total FTE	Program A Allocation	Program B Allocation	Program C Allocation	Program D Allocation	TOTAL
NUMBER OF FULL TIME EMPLOYEES (FTE)	10	2.75	5	1.25	19	53%	14%	26%	7%	100%
Description of agency overhead costs to be allocated based on number of FTE (example: shredding, office supplies, information technology, telephones)					Agency Overhead Costs					
Shredding services					\$75.00	\$39.47	\$10.86	\$19.74	\$4.93	\$75.00
General Office Supplies					\$55.00	\$28.95	\$7.96	\$14.47	\$3.62	\$55.00
Information Technology					\$350.00	\$184.21	\$50.66	\$92.11	\$23.03	\$350.00
						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Position Title for Allocation of salaries and benefits for employees in positions such as accounting and executive director					Agency Total	Program A	Program B	Program C	Program D	
Executive Director					\$5,100.00	\$2,684.21	\$738.16	\$1,342.11	\$335.53	\$5,100.00
Finance Manager					\$4,000.00	\$2,105.26	\$578.95	\$1,052.63	\$263.16	\$4,000.00
Administrative Assistant					\$3,200.00	\$1,684.21	\$463.16	\$842.11	\$210.53	\$3,200.00
						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
The following expenditure types will be allocated to programs based on the SQUARE FEET AREA of space utilized as of the date of this plan. Example(s) of types of costs:	Program A - Square Feet	Program B - Square Feet	Program C - Square Feet	Program D - Square Feet	Agency Total	Program A	Program B	Program C	Program D	TOTAL
SQUARE FEET	100	20	65	8	193	52%	10%	34%	4%	100%
Building Rent					\$3,500.00	\$1,813.47	\$362.69	\$1,178.76	\$145.08	\$3,500.00
Utilities					\$375.00	\$194.30	\$38.86	\$126.30	\$15.54	\$375.00
Property Taxes					\$200.00	\$103.63	\$20.73	\$67.36	\$8.29	\$200.00
Janitorial Svcs & Supplies					\$195.00	\$101.04	\$20.21	\$65.67	\$8.08	\$195.00
						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Costs allocated based on number of FTE					\$480.00					\$480.00
Costs allocated for salaries/benefits of employees in positions such as accounting and executive director					\$12,300.00					\$12,300.00
Costs allocated based on the square feet area of space					\$4,270.00					\$4,270.00
Total Costs Allocated					\$17,050.00					\$17,050.00

Example Only

Appendix H

General Ledger Example

CCHHS may determine that a general ledger printout will be sufficient documentation for certain costs. It may NOT need to be a formal general ledger; it may be as simple as an export document from a contractors financial system.

There may be some flexibility about what this looks like, but it must include: vendor name, description, dates and amounts of the expense.

Descr	Project	Activity	Account	Amount	Trans Date	Acctg Date	Descr2	ID	Name	Invoice	Invoice Dt	Vendor	Quantity	Time Rptg Cd	System Source
Project A	0000000101	0000000001	5100100	89.03	5/15/2023	5/31/2023	REG - Reg Earns	12345	Smith, John				0		PAYROLL
Project A	0000000101	0000000001	5100100	0.00	5/2/2023	5/31/2023	TL Timesheet Data	12345	Smith, John				0.75	REG	TIME&LABOR
Project A	0000000101	0000000001	5100100	0.00	5/3/2023	5/31/2023	TL Timesheet Data	12345	Smith, John				0.25	REG	TIME&LABOR
Project A	0000000101	0000000001	5100100	0.00	5/8/2023	5/31/2023	TL Timesheet Data	12345	Smith, John				1	REG	TIME&LABOR
Project A	0000000101	0000000001	5100100	0.00	5/9/2023	5/31/2023	TL Timesheet Data	12345	Smith, John				0.5	REG	TIME&LABOR
Project A	0000000101	0000000001	5100100	0.00	5/10/2023	5/31/2023	TL Timesheet Data	12345	Smith, John				0.5	REG	TIME&LABOR
Project A	0000000101	0000000001	5100100	0.00	5/12/2023	5/31/2023	TL Timesheet Data	12345	Smith, John				0.5	REG	TIME&LABOR
Project A	0000000101	0000000001	5200200	32.84	5/15/2023	5/31/2023	Employer Medical Benefits	12345	Smith, John				0		PAYROLL
Project A	0000000101	0000000001	5200300	1.29	5/15/2023	5/31/2023	Employer Medicare	12345	Smith, John				0		PAYROLL
Project A	0000000101	0000000001	5200300	5.52	5/15/2023	5/31/2023	Employer Social Security	12345	Smith, John				0		PAYROLL
Project A	0000000101	0000000001	5200400	9.25	5/15/2023	5/31/2023	Employer 401K	12345	Smith, John				0		PAYROLL
Project A	0000000101	0000000001	5200500	0.53	5/15/2023	5/31/2023	Employer Unemployment	12345	Smith, John				0		PAYROLL
Project A	0000000101	0000000001	5200600	0.71	5/15/2023	5/31/2023	Employer WA Family Leave	12345	Smith, John				0		PAYROLL
Project A	0000000101	0000000001	5410100	685.00	5/1/2023	5/31/2023	Client Bus Pass			36-51-610952.0	4/4/2023	Cowlitz Transit	0		ACCOUNTS_PAYABLE
Project A	0000000101	0000000001	5420300	7.80	5/5/2023	5/31/2023	Program A Postage			323-2023	5/31/2023	USPS	0		ACCOUNTS_PAYABLE
Project A	0000000101	0000000001	5420700	250.00	5/25/2023	5/31/2023	Event Flyers			323-2023	5/31/2023	XYZ Print Shop	0		ACCOUNTS_PAYABLE
Total				1081.97									3.5		