



## ATTACHMENT D PAYMENT AND REPORTING SCHEDULE

**NOTE: This is a SAMPLE Attachment D for reference only. When preparing your contract documents, please insert the Attachment D mailed to you with your contract instructions.**

*Aid to Localities Financial System*

**Contract Number:**

**Contract Period:**

### I. PAYMENT PROVISIONS

In full consideration of contract services to be performed the State Agency agrees to pay and the contractor agrees to accept a sum not to exceed the amount noted on the face page hereof. All payments shall be in accordance with the budget contained in the applicable Attachment B form (Budget), which is attached hereto.

#### A. Advance Payment, Initial Payment and Recoupment Language (if applicable):

1. The State agency will make an advance payment to the Contractor, during the initial period, in the amount of N/A percent (N/A%) the budget as set forth in the most recently approved applicable Attachment B form (Budget).
2. The State Agency will make an initial payment to the Contractor in the amount of N/A percent (N/A%) of the annual budget as set forth in the most recently approved applicable Attached B form (Budget). This payment will be no later than N/A days from the beginning of the budget period.
3. Scheduled advance payments shall be due in accordance with an approved payment schedule as follows:

<b><u>Payment Period:</u></b>	<u>July-Sept Quarter</u>	<u>Oct-Dec Quarter</u>	<u>Jan-Mar Quarter</u>	<u>Apr-June Quarter</u>	<b><u>Optional</u></b>
<b><u>Payment Due:</u></b>	July 1st	October 1st	January 1st	April 1st	1st day of 5th Quarter

**Payment Amount:**

4. Recoupment of any advance payment(s) or initial payment(s) shall be recovered by crediting (N/A%) of subsequent claims and such claims will be reduced until the advance is fully recovered within the contract period.

#### B. Interim and/or Final Claims for Reimbursement

Claiming Schedule (*select applicable frequency*):

- |   |          |   |
|---|----------|---|
| <input type="checkbox"/> Quarterly Reimbursement                          | Due Date | N/A   |
| <input type="checkbox"/> Monthly Reimbursement                            | Due Date | N/A   |
| <input type="checkbox"/> Biannual Reimbursement                           | Due Date | N/A   |
| <input type="checkbox"/> Fee for Service Reimbursement                    | Due Date | N/A   |
| <input type="checkbox"/> Rate Based Reimbursement                         | Due Date | N/A   |
| <input type="checkbox"/> Fifth Quarter Reimbursement                      | Due Date | N/A   |
| <input type="checkbox"/> Milestone/Performance Reimbursement              | Due Date | N/A   |
| <input checked="" type="checkbox"/> Scheduled Reimbursement               | Due Date | <b>A single final claim for each contract year shall be submitted annually by submission of the Consolidated Fiscal Report (CFR) as set forth in Section II(A) of this Attachment D</b> |
| <input type="checkbox"/> Interim Reimbursement as Requested by Contractor | Due Date |   |



## ATTACHMENT D PAYMENT AND REPORTING SCHEDULE

Aid to Localities Financial System

Contract Number:

Contract Period:

### II. REPORTING PROVISIONS

#### A. Expenditure-Based Reports (select the applicable report type):

- Narrative/Qualitative Report

The Contractor will submit, on a quarterly basis, not later than \_\_\_\_ days from the end of the quarter, the report described in Section III(G)(2)(a)(i) of the Master Contract.

- ConStatistical/Quantitative Report

The Contractor will submit, on a quarterly basis, not later than \_\_\_\_ days from the end of the quarter, the report described in Section III(G)(2)(a)(ii) of the Master Contract.

- Expenditure Report

The Contractor will submit, on a quarterly basis, not later than \_\_\_\_ days after the end date for which reimbursement is being claimed, the report described in Section III(G)(2)(a)(iii) of the Master Contract.

- Final Report

The Contractor will submit the final report as described in Section III(G)(2)(a)(iv) of the Master Contract, no later than \_\_\_\_ days after the end of

- Consolidated Fiscal Report (CFR)\*

The Contractor will submit the CFR on an annual basis, in accordance with the time frames designated in the CFR manual. For New York City contractors, the due date shall be November 1 of each year; for Upstate and Long Island contractors, the due date shall be May 1 of each year.

\*The Consolidated Fiscal Reporting System is a standardized electronic reporting method accepted by Office of Alcoholism & Substance Services, Office of Mental Health, Office of Persons with Developmental Disabilities and the State Education Department, consisting of schedules which, in different combinations, capture financial information for budgets, quarterly and/or mid-year claims, an annual cost report, and a final claim. The CFR, which must be submitted annually, is both a year-end cost report and a year-end claiming document.

#### B. Progress-Based Reports

##### 1. Progress Reports

The Contractor shall provide the report described in Section III(G)(2)(b)(i) of the Master Contract in accordance with the forms and in the \_\_\_\_ format provided by the State Agency, summarizing the work performed during the contract period (see Table 1 below for the annual schedule).

##### 2. Final Progress Report

Final scheduled payment will not be due until \_\_\_\_ days after completion of agency's audit of the final expenditures report/documentation showing total gant expenses by vendor with its final invoice. Deadline for submission of the final report is \_\_\_\_\_. The agency shall complete its audit and notify vendor of the results no later than \_\_\_\_\_. The Contractor shall submit the report not later than \_\_\_\_ days from the end of the contract.

#### C. Other Reports

The Contractor shall provide reports in accordance with the form, content and schedule as set forth in Table 1.



**ATTACHMENT D  
PAYMENT AND REPORTING SCHEDULE**

*Aid to Localities Financial System*

**Contract Number:**

**Contract Period:**

**TABLE I - REPORTING SCHEDULE**

PERIOD COVERED	DUE DATE
NOTE: For OMH fiscal and program reporting requirements other than the CFR, see Attachment A-1, Section A and Section B(1)(a)(b)	
NOTE: For budget modification requirements, see Attachment A-1, Section B(3)(f)	

**III. SPECIAL PAYMENT AND REPORTING PROVISIONS**