City of Minneapolis
Employment and Training Program

YEAR ROUND WIA YOUTH PROGRAM

COST REIMBURSEMENT INVOICE

CITY USE ONLY	
VE# _____	PO# _____
UT ACCT: _____	CODE _____
INV# _____	DATE _____
VO# _____ LOC# _____	SPC _____
AP CLERK _____	DATE PD _____

PROVIDER NAME:	PROGRAM: Year Round WIA Youth Program	INVOICE #:
ADDRESS:	MASTER CONTRACT #:	FAN #:
	FAN PERIOD: FROM: TO:	
CONTACT PERSON/PHONE NUMBER:	INVOICE PERIOD: FROM: TO:	

DESCRIPTION (cost categories)	FAN BUDGET	COST THIS INVOICE PERIOD	CUMULATIVE TOTAL
1a. In-School Youth Wages/Fringe Benefits (Wages/fringe paid to youth participants while engaged in program activities).	**$**	$	$
1b. Out-of-School Youth Wages/Fringe Benefits (Wages/fringe paid to youth participants while engaged in program activities).	**$**	$	$
2a. In-School Youth Direct Services (Costs associated with providing direct service to youth including **participant incentives. Excludes** youth participant wages/fringe benefits and support services. Wages and fringe benefits for staff who provide direct youth services should be included in this category).	**$**	$	$
2b. Out-of-School Youth Direct Services (Costs associated with providing direct service to youth including **participant incentives. Excludes** youth participant wages/fringe benefits and support services. Wages and fringe benefits for staff who provide direct youth services should be included in this category).	**$**	$	$
3a. In-School Youth Support Services (Items necessary for youth to participate in WIA, such as transportation, clothing, tools, child care, housing/rental assistance, school-related expenses, etc. These expenses may be paid directly to the youth or to a third-party vendor).	**$**	$	$
3b. Out-of-School Youth Support Services (Items necessary for youth to participate in WIA, such as transportation, clothing, tools, child care, housing/rental assistance, school-related expenses, etc. These expenses may be paid directly to the youth or to a third-party vendor).	**$**	$	$
4a. In-School Other Services (Costs that should be included in this category include stipends provided for participation in program activities, including educational activities, nominal costs associated with youth recruitment such as flyers and items distributed at job/career fairs).	**$**	$	$
4b. Out-of-School Other Services (Costs that should be included in this category include stipends provided for participation in program activities, including educational activities, nominal costs associated with youth recruitment such as flyers and items distributed at job/career fairs).	**$**	$	$
TOTAL EXPENSES	**$**	$	$

I certify that the information in this statement is correct to the best of my knowledge and the expenditures reflected here were made in accordance with conditions of the master contract and FAN. I also certify that all the required payroll tax and income tax monies have been withheld from wages of persons employed by this organization to this date, and that such funds have been held in a reserve fund or transmitted to local, state or federal officials as required by appropriate laws.

PREPARED BY: **SIGNATURE/DATE:**	**DIRECTOR OF AGENCY:** **SIGNATURE/DATE:**

CITY USE ONLY				
PROVIDER #:	INVOICE #:	CITY PURCHASE ORDER #:	REQUISITION #:	
TOTAL OF INVOICE:	LINE 1a:	LINE 1b:	LINE 2a:	
LINE 2b:	LINE 3a:	LINE 3b:	LINE 4a:	LINE 4b:
APPROVED BY METP			**DATE**	