**Completing Your Early Childhood Iowa Area** 

# Annual Report on Iowagrants.gov

Early Childhood Iowa Area (ECIA) boards must complete the area's annual report online through the Iowagrants.gov website. The following component reports make up your board's annual report:

- Board and Contact Information
- Type of Services

Direct Services	Indirect Services
Car Seat	Business Investment Program
Crisis/Emergency Care	Child Care Nurse Consultant
Dental	Coordinated Intake
Early Care & Education Scholarships	hawk-I Outreach
Early Care & Education Supportive Services	Quality Improvement for Early Learning
Health Prevention	Preschool Scholarship Coordination
Literacy	Professional Development – Conferences
Prenatal/Postnatal	Professional Development – Credit-bearing
Transportation	Professional Development – Training
	Public Awareness/Child Fairs
	Resource Libraries
	Technical Assistance: Consultation, Mentoring,
	Coaching
	WAGE\$

- Family Support Home Visitation
- Family Support Parent Education
- Administrative Staff (ECIA director, support staff, etc.)
- Administrative Expenses
- Financial Summaries (Early Childhood, School Ready and Other Funding)
- Financial Statement Attachments (Early Childhood and School Ready)

#### **OVERARCHING IMPORTANT INFORMATION**

- Your area's annual report on lowagrants.gov is made up of many "mini" status/component reports.
- "DIRECT SERVICES" and "INDIRECT SERVICES" are grouped together in alphabetical order.
- You must 'select/open,' 'Edit,' 'Save' and 'Mark as Complete' each DIRECT SERVICE and INDIRECT SERVICE component report even if your board does not fund a program, services or activities in one of the types of services.
- Each time you make changes to a component report, click on 'Edit.' [Note: You cannot make changes to any component report after you click on 'Submit.']

• The same instructions display at the top of each DIRECT SERVICE and INDIRECT SERVICE component report. Always read the instructions at the beginning of a component report.

# Instructions

If your board funds two or more \_\_\_\_\_\_ programs, combine and report the performance measures data together.

Use the TAB key to move from one field to the next. When entering financial information, include both dollars and cents, example: 95234.22

### Note: This is a two-part form; follow instructions carefully!

To begin entering information into this form, click "Edit" at the top of the form. You can complete all fields except the "Optional: Other Funding Expended and Source" field. Click "Save" at the top of the form. Now, the "Optional: Other Funding Expended and Source" field is available. If applicable, click "Add" to enter the source and funding amount in the fields. Next, click on "Save" at the top of the form. Repeat this process for each 'Optional Funding" entry in this section.



# **DOM Electronic Grant Management System**

	Enterprise A	&A	What Is A&A?	
SIGN IN	CREATE AN ACCOUNT	FORGOT PASSWORD	FORGOT ID	
Sign into DOM	Electronic Grant M	lanagement Syster	m here.	
Enter your Acc Grant Manager	count Id and passv ment System.	vord to sign into D	OM Electronic	
Ac	count Id:			Enter your account ID and password.
Pa	ssword:			
	Sign In Acco	ount Details		

S Welcome	
Main Menu	
Click Help above to view instructions. Go to "My Profile" to reset password.	
Instructions	
My Profile	
😰 Funding Opportunitie	5
Wy Applications	
🦓 My Grants 🚽	
	lick on 'My Grants.'

🕎 Menu   🤱 H	lelp   📲 Lo	og Out			Sack   🤙	Print 🛛 🧼 Add	渊 Delete   💰 Edit   📙 Save
🐊 Grant Tra	cking						
Current Grant/	Projects						Closed Grant/Projects   Claims
Grant/Projects in the	status Underw	ay or Sus	pended appear on	this list. To view other Grant/Proj	ects, click the closed Gra	ant/Projects link.	
ID	Status	Year	Title	Program Area	Grant Adm	ninistrator	Grant/Project Amount
14-ECI TEST	Underway	2014	14-ECI TEST	Early Childhood Iowa	Tena Malone		\$0.00
test	Underway	2013	Test	Early Childhood Iowa	Tami Foley		\$0.00
				Te	otal	\$0.00	
		This so	creenshot is	from the 'TEST' site.	Your screen w	ill	Showing 1 - 2 of 2
		have y	'our area's l	D for the appropriate	e state físcal yea	ar.	

🅎 Menu   🧟 Help   🍟 Log Out		🥱 Back   쵫 Print   🧼 Add   渊 Delete   룴 Edit   📙 Save
🐊 Grant Tracking		
Grant/Project: 14-ECI TEST - 14-EC	CI TEST - 2014	
Status:	Underway	
Program Area:	Early Childhood Iowa	
Grantee Organization:	ECI TA Team	
Program Officer:	Tena Malone	
Awarded Amount:	\$0.00	
Instructions		
The grant forms appear below.		
Grant/Project Components		
You can define your own alerts in the Alerts se	ection	
	Component	Last Edited
General Information		10/25/2013
Status Reports		
Opportunity		•
Click	c on 'Status Reports.'	

# 瓷 Menu | 🧟 Help | 📲 Log Out

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## A Grant/Project Tracking

Grant/Project: 14-ECI TEST - 14-EC	CI TEST - 2014			
Status:	Underway			
Program Area:	Early Childhood Iowa			
Grantee Organization:	ECI TA Team			Г
Program Officer:	Tena Malone	Click on the appro	opriate status report	
Awarded Amount:	\$0.00	for the an	nual report.	
				]
Status Reports - Pending		Cop	y Existing Status Report	Return to Components
ID Type	Title Date From-T	o Due Date	Submitted Date	Arrived? Status
14-ECI TEST - 01 Annual Repo	ort 07/01/2013-06/30/2	2014		- Editing

Status Report: test001 - 01		
Grant:	test001-Test_grant	
Status:	Editing	
Drogram Öreat	Early Childhood Jawa	
	Early Childhood Iowa	
Grantee Organization:	ECI TA Team	
Program Manager:	Tami Foley	
Components		
Complete each component of the status re	eport and mark it as complete. Click Submit whe	en you are done.
	Name	
General Information		
Board and Contact Information		
Car Seat - Direct Services		
Crisis/Emergency Care - Direct Service:	s	
Dental - Direct Services		
Early Care & Education Scholarships - D	Direct Services	
Early Care & Education Supportive Serv	/ices - Direct Services	
Health Prevention - Direct Services		
Literacy - Direct Services		
Prenatal/Postnatal - Direct Services		
Transportation - Direct Services		
Child Care Nurse Consultant - Indirect S	ervices	These are
Coordinated Intake - Indirect Services		
Hawk-I Outreach - Indirect Services		annual re
Quality Improvement for Early Learning	- Indirect Services	'Edit ' 'S
Preschool Scholarship Coordination - In	direct Services	
Professional Development: Conferences	s - Indirect Services	SERVICE an
Professional Development: Credit-bearin	ng - Indirect Services	if your b
Professional Development: Iraining - Inc	direct Services	ii your b
Public Awareness/Child Pairs - Indirect	services	act
Resource Libraries - Indirect Services	staring Capabing Indirect Services	
WARE® Indirect Services	itornig, coaching - indirect services	
Family Support - Home Visitation		
Family Support - Parent Education		
Administrative Staff		
Administrative Expenses		
Financial Summary - Early Childhood Fu	inds	
Financial Summary - School Ready Fund	ts	
Financial Summary - Other Funding		
SFY15 Financial Statement Attachment		

These are the component reports that make up your annual report. REMEMBER, you must 'select/open,' 'Edit,' 'Save' and 'Mark as Complete' each DIRECT ERVICE and INDIRECT SERVICE component report even if your board does not fund a program, services or activities in one of the types of services.

# Board and Contact Information Component Report

Board and Contact Information			
Area and Counties Served			
Name of Early Childhood Area:	ABC Area		
		Complete the	information in aach
		data field Aft	information in each
		fields on this c	component report
Website:	www.ABCwebsite.org	click on 'Save	,
Counties in ECIA:	Dubuque 🗸		
Current Board Chairperson			
Current Board Chairperson Name:	Mr. Chairperson	]	
Board Chairperson Address:	123 Noway Lane	]	
Board Chairperson City:	Nowhere	]	
Board Chairperson State:	Iowa 🔻		
Board Chairperson Zipcode:	50321		
Board Chairperson Phone:	712-415-7854		
Board Chairperson E-mail:	mr.chairperson@abc.org		
Current Fiscal Agent			
Current Fiscal Agent Name:			
Fiscal Agent Address:			
Fiscal Agent City:			
Fiscal Agent State:	•		
Fiscal Agent Zipcode:			
Fiscal Agent E-mail:			
Contact Person for the Local ECI Board	1		
Contact Person Name:			
Contact Address:			
Contact City:			
Contact State:	<b>•</b>		
Contact Zipcode:			
Contact Phone:			
Contact E-mail:			

Click on 'Save' to save the data you just entered.

Click here to download the Board Matrix template.

Board Matrix Attachment\*

Click here to download the Community Plan Updates template.

#### Community Plan Updates\*

Click here to download the Executive Summary template

**Executive Summary Attachment** 

When you click on "Click Here to download..." the following pop-up screen displays. [Note: The type of pop-up screen that displays will vary based on your computer's operating system.] Click "Open" and the template/form displays. Complete the template/form and save it on your computer. [We recommend that you create a folder on your "Desktop" or "C Drive" to save your lowagrants.gov forms/templates.] In this section of the component report, you download/upload information. Complete the following actions for attachments on the "Board and Contact Information" component report:

- Board Matrix Download and complete the template and upload.
- Community Plan Updates Download and complete the template and upload.
- Executive Summary This is optional. Boards may either download and complete the stateprovided template and upload or upload the board-developed executive summary.

Do you	want to open or save this file?
	Name: Annual_Report_Assurances_SFY14.doc
	Type: Microsoft Word 97 - 2003 Document
	From: www.iowagrants.gov
	Open Save Cancel
~	While files from the Internet can be useful, some files can notentially
?	harm your computer. If you do not trust the source, do not open or

The template/form displays on your computer screen for you to complete and save.

Click here to download the Board Matrix template. Board Matrix Attachment Click here to download the Community Plan Updates template.	
Community Plan Updates*	Upload the template/form by clicking on the icon that is a 'page with a plus sign.' Note: This upload icon does not display on your screen until you click on 'Edit' and 'Save' on the page. [The screenshot on the previous page shows that the upload icon does not initially display.]
IowaGrants - Internet Explorer https://www.iowagrants.gov/addComponentEntityAttachment.do?pk	=1384287358632&fd=StatusReportEciEarlychi



Click here to download the Assurances and	Signature Page.	
Assurances and Signature Page Attachment*	Annual_Report_Assura	ances_SFY14.doc 🖷 🗲
Click here to download the Board Matrix tem	plate.	
Board Matrix Attachment*		
Click here to download the Community Plan Community Plan Updates*	Updates template.	NOTE: Assurances attachment is no longer part of the annual report. This screen print just provides an example.
Click here to download the Executive Summ	ary template.	
Executive Summary Attachment		The uploaded document file name and a document icon now displays. Once you
		have uploading the attachments and templates, click on 'Mark as Complete.'

# DIRECT SERVICE and INDIRECT SERVICE Component Reports

🍘 Menu ( 👗 Help ( 🍟 Log Out	Saci	k   쵫 Print   🥐 Add   渊 Delete   💰 Edit   🔚
💐 Grant/Project Tracking		
Status Report: 14-ECI TEST - 03		
Grant:	14-ECI TEST-14-ECI TEST	
Status:	Editing	After selecting a DIRECT SERVICE
Program Area:	Early Childhood Iowa	or INDIRECT SERVICE component
Grantee Organization:	ECI TA Team	report, click on "Edit."
Program Manager:	Tena Malone	
natructiona		
your board funds two or more dental program se the TAB key to move from one field to the ote: This is a two-part form; follow instru	is, combine and report the performance measures data together. next. When entering financial information, include both dollars and cen uctions carefully!	ts, example: 95234.22
your board funds two or more dental program se the TAB key to move from one field to the ote: This is a two-part form; follow instru- b begin entering information into this form, clit e top of the form. Now, the "Optional: Other or "Save" at the top of the form. Report this p	is, combine and report the performance measures data together. next. When entering financial information, include both dollars and cen- locitions, carefully! ck: "Catif" at the top of the form. You can complete all fields except the " Funding Expended and Source" field is available. If applicable, click "A rocess for each "Optional Funding" entry in this section.	ts, example: 95234.22 Optional: Other Funding Expended and Source" field. Olick "Savi dd" to enter the source and funding amount in the fields. Next, c
your board funds two or more dental program se the TAB key to move from one field to the ote: This is a two-part form; follow instru- begin entering information into this form, ofi- e top of the form. Now, the "Optional: Other "Save" at the top of the form. Report this p Opental - Direct Services	is, combine and report the performance measures data together. next. When entering financial information, include both dollars and cen- loctions arefully! by Zolf," at the top of the form. You can complete all fields except the ' Funding Expended and Source" field is available. If applicable, click "A- rocess for each 'Optional Funding" entry in this section.	ts, example: 95234.22 Optional: Other Funding Expended and Source" field. Click "Saw dd" to enter the source and funding amount in the fields. Next, c Mark as Complete   Go to Status Report Fo
your board funds two or more dental program se the TAB key to move from one field to the ote: This is a two-part form; follow instru- begin entering information into this form, olive top of the form. Now, the "Optional: Other "Save" at the top of the form. Report this p tental - Direct Services Name of Program or Service	is, combine and report the performance measures data together. next. When entering financial information, include both dollars and cen- inctions carefully! by "cdit" at the top of the form. You can complete all fields except the " Funding Expended and Source" field is available. If applicable, click "A rocess for each "Optional Funding" entry in this section.	ts, example: 95234.22 Optional: Other Funding Expended and Source" field. Oliok "Saw dd" to enter the source and funding amount in the fields. Next, c Mark as Complete   Go to Status Report Fo
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your board funds two or more dental program se the TAB key to move from one field to the ote: This is a two-part form; follow instru- begin entering information into this form, cli- begin entering information into this form, cli- te top of the form. Now, the "Optional: Other "Save" at the top of the form. Report this p Opental - Direct Services Name of Program or Service ist the name of each contractor funded. Contractor	is, combine and report the performance measures data together. next. When entering financial information, include both dollars and cen inctions carefully! sector: "at the top of the form. You can complete all fields except the " Funding Expended and Source" field is available. If applicable, click "A rocess for each "Optional Funding" entry in this section.	ts, example: 95234.22 Optional: Other Funding Expended and Source" field. Click "Savi dd" to enter the source and funding amount in the fields. Next, c Mark as Complete   Go to Status Report Fo
your board funds two or more dental program se the TAB key to move from one field to the ote: This is a two-part form; follow instru- begin entering information into this form, clic e top of the form. Now, the "Optional: Other "Save" at the top of the form. Report this p Optical - Direct Services Name of Program or Service ist the name of each contractor funded. Contractor	is, combine and report the performance measures data together. next. When entering financial information, include both dollars and cen locitons carefully! Sector: "a the top of the form. You can complete all fields except the " Funding Expended and Source" field is available. If applicable, click "A rocess for each "Optional Funding" entry in this section.	ts, example: 95234.22 Optional: Other Funding Expended and Source" field. Click "Sav dd" to enter the source and funding amount in the fields. Next, o Mark as Complete   Go to Status Report Fo
your board funds two or more dental program se the TAE key to move from one field to the ote: This is a two-part form; follow instru- begin entering information into this form, cli- te top of the form. Now, the "Optional: Other n "Save" at the top of the form. Report this p Opental - Direct Services Name of Program or Service ist the name of each contractor funded. Contractor Description Indicate Program Type:	is, combine and report the performance measures data together. next. When entering financial information, include both dollars and cen lotions carefully! Secont at the top of the form. You can complete all fields except the " Funding Expended and Source" field is available. If applicable, click "A rocess for each "Optional Funding" entry in this section.	ts, example: 95234.22 Optional: Other Funding Expended and Source" field. Click "Sava dd" to enter the source and funding amount in the fields. Next, o Mark as Complete   Go to Status Report Fo

# Completing the fields for the "Dental – Direct Services" component report:

The first set of screenshots have blank fields, the second set has data entered in the fields and the third set provides screenshots after clicking on "Save."

# <u>Blank Fields</u>

Dental - Direct Services				
Name of Program or Service				
List the name of each contractor funded.				
Contractor		*		
Description				
Description		*		
Indicate Program Type:	<b></b>			
Link to Which Comm. Plan Priority or Priorities				
How much was invested (input me	asures)			
Fiscal investments must coincide with early child	dhood financial statement			
	Source			Amount
Salved Bredy Freely Support			\$0.00	]

		<b>30.00</b>	
School Ready-Quality		\$0.00	
School Ready-Other Programs/Services		\$0.00	
School Ready-Admin		\$0.00	
Optional: Other Funding Expended and Source			
Source			
			\$0.00
	IMPORT "ADD" o	ANT: You can other funding	

sources after saving the initial data you enter.

How much was done or produced (Output measures)	
Age of children served (as of September 15)	
Output Measures	# done or produced
Prenatal	0
Children 0 to 1 Year	0
Children 1 to 2 Years	0
Children 2 to 3 Years	0
Children 3 to 4 Years	
Children 4 to 5 Years	
Children 5 to 6 Years	
How well did we do it (Quality/Efficiency Measures)	
Children Screened for	
	# Achieved Measure
Of those Children Screened, % referred	
# Achieved Measure	
What Was the Change in Conditions for Those We Served (Outco	ome Measures)
% of children who need dental	
# Achieved Measure	
% of children who are cavity free	
# Achived Measure	
	Define to Tee

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# Data Entered in Fields

Dental - Direct Services		
Name of Program or Service	Bright Smilies	
List the name of each contractor funded.		
Contractor	ABC County Public Health	*
		Ŧ
Description	Program provides screenings for dental cavities, fluoride varnish, and dental care education.	*
		Ŧ
Indicate Program Type:	Locally Developed Model -	
Link to Which Comm. Plan Priority or Priorities	Healthy Children	

How much was invested (input measures)	
Fiscal investments must coincide with early childhood financial statement	
Source	Amount
School Doody Family Support	
School Doarty Procedual	1508.00
School Ready-Quality	3000.00
School Ready-Other Programs/Services	1000.00
School Ready-Admin	0
Optional: Other Funding Expended and Source	
Source	
	\$0.00

How much was done or produced (Output measures)	
Age of children served (as of September 15)	
Output Measures	# done or produced
Prenatal	0
Children 0 to 1 Year	0
Children 1 to 2 Years	0
Children 2 to 3 Years	5
Children 3 to 4 Years	50
Children 4 to 5 Years	10
Children 5 to 6 Years	0

# How well did we do it (Quality/Efficiency Measures)

. . . . . . .

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Children Screened for	Cavities	65
		# Achieved Measure
Of those Children Screened, % referred on for additional services	10	
or treatment	# Achieved Measure	
What Was the Change in Condition	ns for Those We Served (Outcome Measures)	
% of children who need dental	•	
treatment that went to a dentist	o # Achieved Measure	
	- Achieved Measure	
% of children who are cavity free	55	
	# A chived Measure	

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# Data Saved

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Dental - Direct Services	Mark as Complete   Go to Status Report Forms
Name of Program or Service	Bright Smilies
List the name of each contractor funded.	
Contractor	ABC County Public Health
Description	Program provides screenings for dental cavities, fluoride varnish, and dental care education.
Indicate Program Type:	Locally Developed Model
Link to Which Comm. Plan Priority or Priorities	Healthy Children

How much was invested (input measures)			
Fiscal investments must coincide with early childhood financial statement			
Source			Amount
School Ready-Family Support			\$0.00
School Ready-Preschool			\$1,500.00
School Ready-Quality			\$3,000.00
School Ready-Other Programs/Services			\$1,000.00
School Ready-Admin	You can now click on "Add" to		\$0.00
	YOU CAILING CITCK OIL AUU LO	Totals	\$5,500.00
	identify other funding sources		
Optional: Other Funding Expended and Source	that supported the program		► Add
	that supported the program,		
Source	service or activity.	ſ	
	,		\$0.00
Total Funding			
Total \$5,500.00			

# Following are screenshots for adding other funding sources that supported the program, service or activity.

Optional: Other Funding Expended and Source		
Source*	\$0.00 Amount	
Optional: Other Funding Expended and Source		
Source* I-Smile	\$1000.00 Amount	After entering information in
		the two fields, click on "Save."

How much was invested (input measures)		
Fiscal investments must coincide with early childhood financial statement		
Source	An	nount
Sebeel Deady Family Support		<b>\$0.00</b>
Cabaal Deady Dreachaol		\$1,500.00
School Ready-Quality		\$3,000.00
School Ready-Other Programs/Services		\$1,000.00
School Ready-Admin	Totala	\$0.00
	Totals	\$5,500.00
Optional: Other Funding Expended and Source		Add
Source		<u> </u>
I-Smile	The 'How much was invested' section	\$1,000.0
		\$1,000.0
	now includes the other funding sources	
Total Funding	and the "Total Funding" amount is	
Total \$6,500.00	recalculated. If there is additional	
	'Other Funding,' click on 'Add' again to	
	enter the information and repeat the	
	same steps previously described.	

iow much was done of produced	d (Output measures)	)				
e of children served (as of September 15	)					
Output M	easures			# done or proc	luced	
enatal						
ildren 0 to 1 Year						
ildren 1 to 2 Years						
ildren 2 to 3 Years						
ildren 3 to 4 Years						
ildren 4 to 5 Years						
ildren 5 to 6 Years						
		Totals				
low well did we do it (Quality/Eff	iciency Measures)					
in wen die we do it (gaanty/En	loterioy measures)					
Children Screened for	Cavities	65		65	100.0%	
		# Achieved Measure		# Possible	%	
Of those Children Screened, %	2 10			65	15.38%	
or treatment	# Achieved Measure			# Possible	%	
Cast pay Child for the convict	¢0 500 00		05		¢400.00	
cost per clina for the service	7 00,000.00 Total Cost		# of Children		\$100.00	
					Ŧ	
What Was the Change in Condition	ons for Those We Se	erved (Outcome Me	easures)			
% of children who need denta	1.8			10	80.0%	/
reatment that went to a dentist	# Achieved Measure			# Possible	%	
% of children who are cavity free	55			65	84 62%	
no or children into are carry inco	# Achived Measure			t Dessible	04.0270	

Dental - Direct Services		Mark as Complete   Go to Status Report Forms
Name of Program or Service	Bright Smilies	▶
List the name of each contractor funded.		
Contractor	ABC County Public Health	
Description	Program provides screenings for dental education.	cavities, fluoride varnish, and dental care
Indicate Program Type:	Locally Developed Model	
Link to Which Comm. Plan Priority	Healthy Children	When you are finished updating/saving the component report, click on "Mark as Complete." <i>REMEMBER, you must 'select/open,' 'Edit,' 'Save'</i> <i>and 'Mark as Complete' each DIRECT SERVICE</i> <i>and INDIRECT SERVICE component report even if</i> <i>your board does not fund a program, services or</i> <i>activities in one of the types of services.</i>

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After you mark a component report as complete, a 'checkmark' displays in the 'Complete?' column and the date displays in the 'Last Edited' column.

×

Components	Preview   Submit
Complete each component of the status report and mark it as complete. Glock Submit when vois are done	
Name	inte? 1 act Editori
Transa Transa	alloy a second of
Chard and Contact Information	010402015
Car Sail Dirari Estainer	00/23/2015
Call Scan- Labor Street Scanters	001202010
Constant Proved Residence in Constant Proved	06/03/2015
Lenser - Deck John Scholminher, Tienet Saninas	00023/2015
Carry Care & Calegoria Science Sciences Transfer Services	001202013
Lang care a consume appointe an esta consul an esta	000002013
Herearc Deard Society	06/33/2015
University University Operations	06/24/2015
Transvertation Stort Services	00/24/2018
Transportation - Later Services	07/09/2015
Coordinated Indian Statistics	66/34/2015
Constanting inducts according a	00/24/2015
Countie terre comment ou services in the services of the servi	DECLARDED S
These hours of schedures has County Countered and these	00/24/2015
Professional Development Conferences Indirect Services	06/24/2015
Professional Development: Cradit Instrum: Indirect Services	66/24/2015
Professional Development: Training, Indirect Services	06/24/2015
Procession of the temperature strategy and the second s	06/24/2015
Toesarra (Marice Indiant Sandra III)	06/14/2015
Tachard Asseture Constitution Moterian Carbins Inflant Service 4	07/09/2015
WAITE Indiant Services	86/24/2015
Founds Support, Henro Visitation	87/14/2015
Tamba Support Parent Februarion	88/24/2015
Administrative Staff	07/14/2015
Administrative Expenses	07/08/2015
Brancial Summary - Early Childhood Fumis	07/14/2015
Rinancial Summary - School Ready Funds	07/08/2015
Financial Summary - Other Funding	06/24/2015
SFY15 Financial Statement Attachment	07/14/2015

### FAMILY SUPPORT – HOME VISITATION and FAMILY SUPPORT – PARENT EDUCATION Component Report

The FAMILY SUPPORT component reports require input data to help you with verifying that the expenditures in the annual report balances with the financial statements. You will also attach your DAISEY Report to one of the Family Support reports. Remember to review the instructions on the form. Click on 'Edit,' complete the data fields, click on 'Save' and then click on 'Mark as Complete.'

poonal: Other Funding Expende	a ana source		Add
ndation	SOUTCE	Amount	\$100.00
unite suit			\$100.00
otal Funding			
Total	\$560.00		
RedCap Report			
tach your RedCap Report here			
RedCap Report	<b>€</b> Add		
Instructions			
your board funds two or more family suppo	vt home visitation programs, combine and report the performance m	essures data together	
se the TAB key to move from one field to th	e next. When entering financial information, include both dollars and	centa, example: 95234.22	
ote: This is a two-part form; follow instruc o begin entering information into this form, save" at the top of the form. Now, the "Option alds. Next, click on "Save" at the top of the fi	ctions carefully! Nex "Edit" at the top of the form. You can complete all fields except th nat Other Funding Expended and Source" field is available. If applica orm, Repeat this process for each "Optional Funding" entry in this sec	e "Optional Other Funding Expended and So spie, click "Add" to enter the source and fundin Non	irce*flekt Click g emount in the
Family Support - Home Visitation			
Name of Program or Service	Home visitation services		
Contractor			
Contractor	Luthertin Services		
	families with children ages 0-3.		
Indicated Program Type:	Research Based / Promising Practice •		
Link to Which Comm. Plan Priority or Priorities	Securing and Nurturing Families		
How much was invested (Input me	asures)		
acal investments must coincide with early c	Andhood Imancial ablement		
THE READ FROM SUPPORT	Source	<b>315010</b>	
Intel Heavy-Free Door		\$100.00	
chool Ready-Quality		\$100.00	
chool Ready-Other/Undesignated		\$100.00	
chool Ready-Admin		\$10.00	
Ontional: Other Funding Expende	d and Source	ADDIG.	Add
optional. Other Funding Expende	Source	Amount	Para.
undation			\$100.00 \$100.00
Total Funding			
Total Funding	\$580.00		
Tutar	#200.00.		
RedCap Report		A	
tach your RedCap Report here		At this time, you are r	not required
RedCap Report	ehha	upload the DAISEY Re 'Mark as Complete'	eport. Click when you a
		finished with th	is report.
<b>7</b>   P 2 G 0			-1

### Administrative Staff Component Report

The ADMINISTRATIVE STAFF component report (ECIA director, support staff, etc.) requires input data to help you with verifying that the expenditures in the annual report balances with the financial statements. Remember to review the instructions on the form. Click on 'Edit,' complete the data fields, click on 'Save' and then click on 'Mark as Complete.'

Administrative Staff (service coord	dination and collaboration)		
Name of Administrative Staff	ABC Director		
Employer of Record	County of Dubuque		
How much was invested (Input me	asures)		
Fiacel Investments must coincide with early cl	alidhood financial statement		
	Source		
Early Childhood Admin		\$100.00	
Constant Constant		*****	
School Ready-Quality		\$100.00	
School Ready-Other/Undesignated		\$100.00	
School Fready-Admin		\$100.00	
Optional: Other Funding Expende	d and Source		
Sour	ce	Amount	
deat			\$100.00 \$100.00

#### ADMINISTRATIVE EXPENSES Component Report

Follow the same process for completing the ADMINISTRATIVE EXPENSES component report as you did with the DIRECT SERVICE and INDIRECT SERVICE component report. Remember to review the instructions on the form. Click on 'Edit,' complete the data fields, click on 'Save' and then click on 'Mark as Complete.'

Instructions			
Use the TAB key to move from one field to th	e next. Include both dollars and cents, exa	mple: 95234.22	
Refer to Tool G for appropriate funds availab	le for administrative expenses.		
Administrative Expenses - Early (	Childhood Funds		
Fiscal Investments Must Coincide With Early	Childhood Financial Statements		
	Early Childhood Expenses/Fees		
Fiscal Agent Fees			\$100.00
Liability Insurance Fees			\$101.00
Financial Audit Fees			\$102.00
Board Expenses			\$103.00
Other (non program) describe below			\$104.00
			\$104.00
Description			
Description			
Administrative Expenses - School Ready	Funds		
Fiscal Investments Must Coincide With School Ready I	Financial Statement		
School Ready Funds Expense	s/Fees Admin	Quality	Other/Undesignated
Fiscal Agent Fees	\$200.00	\$201.00	\$202.00
Liability insurance fees	\$200.00	\$201.00	\$202.00
Board Expenses	\$200.00	\$201.00	\$202.00
Other (non-program) describe below	\$200.00	\$201.00	\$202.00
Description			
School Ready Other (non-program) trave Description	l expenses		
School Ready			
School Ready Expenses/Fees	School Ready Family Support	Sc	nool Ready Preschool Support
a surger is any surger is a set	Accesso	4201.00	and a second sec

### **FINANCIAL SUMMARY Component Reports**

For the FINANCIAL SUMMARY component reports (Early Childhood, School Ready and Other Funding), you are required to answer the confirmation question. Click on 'Edit,' select 'Yes,' and then click on 'Save.' The form auto calculates based on financial data you entered on other component reports. If you make adjustments on other forms, the totals also update on this form. After confirming that the summary report totals match the totals on your financial statements, click on 'Mark as Complete' for each of the FINANCIAL SUMMARY forms.

Confirmation_question Did you complete all the	required forms?*	res						Go to St	atus Report Forms
School Ready - Quality									
Funding	Direct S	ervices	Indired	t Services	ECI	Director		Administrative Expenses	Total Expended
School Ready - Quality		\$338.50		\$152.00		\$100.00		\$1,005.00	\$1,595.50
School Ready- Other/Un	designated	1							
Funding		Direct Se	rvices	Indirect Ser	vices	ECI Direc	tor	Administrative Expenses	Total Expended
School Ready- Other/Undesignat	ted		\$423.00		\$152.00	\$10	00.00	\$1,010.00	\$1,685.00
School Ready- Admin									
Funding	Direct Se	ervices	Indirect	t Services	ECH	Director	,	Administrative Expenses	Total Expended
School Ready- Admin		\$238.00		\$152.00		\$100.00		\$1,000.00	\$1,490.00
School Ready Funds Tot	al								
School Ready Fu	nds Total 🖇	\$6,659.50							

#### FINANCIAL STATEMENT ATTACHMENT Component Report

For the FINANCIAL STATEMENT ATTACHMENT component report, you download and upload the financial statements for each of the funding sources (i.e., Early Childhood and School Ready). There are two difference attachments for each funding source. The 'XX' Financial Statement is the Excel document. The Certified 'XX' Financial Statement is the signed and scanned copy of the financial statement. Remember to 'Mark as Complete' after you upload the financial statements. **<u>REMEMBER to put your ECIA's name on the financial statements</u>.</u>** 

Instructions						
Click here to download the Early Childhood Finan Click here to download the School Ready Financia	ncial Statement ial Statement					
SFY15 Financial Statement Attachmen	nt		Mark as C	omplete   Go to	Status R	eport Forms
Attachment		Description	File Name	File Size	Туре	Delete?
Early Childhood Financial Statement				102.0 MB		6
Certified Early Childhood Financial Statement	•			102.0 MB		0
School Ready Financial Statement				102.0 MB		0
Certified School Ready Financial Statement				102.0 MB		8
Click on the appropriate financial statement. Note: You can either download the financial statement from this screen or the next screen that displays.						

🅎 Menu   🧟 Help   📲 Log Out		Sack   쵫 Print   🧼	Add   渊 Delete   付		Save
💞 Status Report					
Attach File					
Click here to download the Early Childhood Financial Stater	nent				
Click here to download the School Ready Financial Stateme	int				
Browse	SR Financial Statement.xlsx				
Description:* School Re	ady Financial Statement				
	$\neg$   \				
Click on 'Browse' to find the financial	\\	it.			
statement in the location on your					
computer where it is stored and					
select Enter a description in the					
select. Enter a description in the					
'Description' field and click on 'Save.'					
Instructions					
Click here to download the Early Childhood Financial State.	ment				
	57A				
SEY15 Einancial Statement Attachment		Mark as Co	omplete   Go to Statu	is Reno	rt Forms
SI FIOT Indicial Statement Addominent		india da or	mplete   00 to state	ыкеро	intronins
Attachment	Description	Eile Name	File Size	Type	Delete?
Early Childhood Financial Statement			102.0 MB	.16.2	1
Certified Early Childhood Financial Statement	*		102.0 MB		1
School Ready Financial Statement	School Ready Financial Statement	SR Financial Statement.	xlsx 102.0 MB	xlsx	1
Certified School Ready Financial Statement			102.0 MB		6

## Printing

You have two options for printing the annual report.

- 1. **Print each component report separately.** To do this, select the component report you want to print. Once the report displays on your screen, press and hold the 'Ctrl' key on your keyboard and press the 'P' key. The printing pop-up window displays for you to complete the necessary actions to begin printing. [Note: This is the computer shortcut method for printing.]
- 2. **Print the entire report.** On the main Components page that lists all the forms in the annual report, press and hold the 'Ctrl' key on your keyboard and press the 'P' key. The printing pop-up window displays for you to complete the necessary actions to begin printing. Note: A continuous report generates for all component reports even if you do not enter data in a report.

🅎 Menu   🧟 Help   🍟 Log Out		Sack   🗞 Print   🧼 A	dd   渊 Delete	💕 Edit   📙 Save
À Grant Tracking				
Status Report: test001 - 01				
Grant:	test001-Test_grant			
Status:	Editing			
	Luting			
Program Area:	Early Childhood lowa			
Grantee Organization:	ECI TA Team			
Program Manager:	Tami Folov			
	Taitli Foley			
Components				Preview   Submit
Complete each component of the status repo	ort and mark it as complete. Click Submit when you ar	e done.		
	Name		Complete?	Last Edited
General Information			1	
Board and Contact Information			1	07/14/2015
Car Seat - Direct Services			s and a second s	06/23/2015
Crisis/Emergency Care - Direct Services			√	06/23/2015
Dental - Direct Services			s and a second s	06/23/2015
Early Care & Education Scholarships - Direc	ct Services		√	06/23/2015
Early Care & Education Supportive Services	s - Direct Services		s and a second s	06/23/2015
Health Prevention - Direct Services			1	06/23/2015
Literacy - Direct Services			1	06/23/2015
Prenatal/Postnatal - Direct Services			1	06/24/2015
Transportation - Direct Services			1	06/24/2015
Child Care Nurse Consultant - Indirect Servi	ices		√	07/09/2015
Coordinated Intake - Indirect Services			1	06/24/2015
Hawk-I Outreach - Indirect Services			1	06/24/2015
Quality Improvement for Early Learning - Inc	direct Services		1	06/24/2015
Preschool Scholarship Coordination - Indire	ect Services		1	06/24/2015
Professional Development: Conferences - In	ndirect Services		1	06/24/2015
Professional Development: Credit-bearing -	Indirect Services		1	06/24/2015
Professional Development: Training - Indire	ct Services		1	06/24/2015

### Submitting

Once you have entered all the data in the component reports and uploaded templates and forms, you are ready to submit the annual report for your ECIA. All component reports **MUST** be 'Marked as Complete' in order to be able to submit your report even if your board did not fund a program, service or activity for that type of service. When all component reports are 'Marked as Complete,' click on 'Submit.' Note: Once you submit your report, you are no longer able the make changes or updates. You must contact the ECI State Office to 'unlock' the report. Once the report is unlocked, you can make updates. After making changes to your report, you must click on the 'Submit' button again.

Status Report: test001 - 01			
Grant:	test001-Test_grant		
Status:	Editing		
Program Area:	Early Childhood Iowa		
Grantee Organization:	ECI TA Team		
Program Manager:	Tami Foley		
			$\frown$
Components			Preview Submit
Complete each component of the status repo	rt and mark it as complete. Click Submit when you are done.		$\smile$
	Name	Complete?	Last Edited
General Information		$\wedge$	
Board and Contact Information		$\checkmark$	07/14/2015
Car Seat - Direct Services		1	06/23/2015
Crisis/Emergency Care - Direct Services		1	06/23/2015
Dental - Direct Services		1	06/23/2015
Early Care & Education Scholarships - Direct	:t Services	1	06/23/2015
Early Care & Education Supportive Services	- Direct Services	√	06/23/2015
Health Prevention - Direct Services		✓	06/23/2015
Literacy - Direct Services		√	06/23/2015
Prenatal/Postnatal - Direct Services		✓	06/24/2015
Transportation - Direct Services		✓	06/24/2015
Child Care Nurse Consultant - Indirect Servi	ces	✓	07/09/2015
Coordinated Intake - Indirect Services		✓	06/24/2015
Hawk-I Outreach - Indirect Services		✓	06/24/2015
Quality Improvement for Early Learning - Inc	lirect Services	✓	06/24/2015
Preschool Scholarship Coordination - Indire	oct Services	1	06/24/2015
Professional Development: Conferences - In	ndirect Services	$\checkmark$	06/24/2015
Professional Development: Credit-bearing -	Indirect Services	$\checkmark$	06/24/2015