



LOS ANGELES COUNTY

WIA Adult and Dislocated Worker DIRECTIVE

NUMBER: D-DWA-03-003

**SUBJECT: FINAL-FINAL CLOSEOUT
REPORTING FOR FISCAL YEAR 2002-2003**

DATE: 07/17/03

EFFECTIVE DATE: Immediately

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****FOR YOUR IMMEDIATE ATTENTION**
REPLY MUST BE RECEIVED BY AUGUST 7, 2003**

TO: ALL LOS ANGELES COUNTY WIA SERVICE PROVIDERS

The purpose of this Directive is to notify contractors of the Final Closeout procedures for the WIA Adult and Dislocated Worker Program for Fiscal Year 2002/2003.

This Final Closeout Directive is requesting the **actual expenditure reports** as they pertain to the Final Closeout reports submitted as the accrued expenditures should now be actual expenses. In addition, the Final closeout should recount actual cost expended by your agency for the period of July 1, 2002 through June 30, 2003. **Further, this Directive does not allow for any additional expenses above the original closeout documents submitted. Any cost overrides or deficits realized for operational and closeout activities must be paid by the contractor.**

As stated in Directive D-DWA-02-025, agencies were to submit all ACCRUALS through the term end of the contract period. Closeout reports received after July 14, 2003 were not to be paid, and if a Closeout Report was not received, the County closed its accounting records based on your agency's last report of expenditures. This Final-Final Closeout asks for actual expenditures based on the closeout documentation received. **Any non-expended funds must be returned with this document by August 7, 2003. Any checks should be made out to: County of Los Angeles.**

The documents you are required to submit are as follows:

1) Final-Final Cost Reports-Attachment A and B

Final-Final Cost Reports consist of two original copies of your actual Final Request for Cash and Invoice. **Any non-expended funds must be returned with this document by August 7, 2003. Any checks should be made out to: County of Los Angeles.**

2) Final-Final Cover Sheet-Attachment C

Check the appropriate box and sign attestation statement. Attachment of Final-Final Cost Reports as necessary.


You are requested to provide this office with these final closeout documents no later than **5:00 p.m. on Thursday, August 7, 2003.**

The County will close its records based on the submission of an acceptable closeout package from your agency. Contractors are required to submit **two original copies of their final cost reports.** The closeout report package is included with this Directive, see Attachments A, B, and C.

Please submit your documents to the following address:

County of Los Angeles
Community and Senior Services Department
WIA Employment and Training Programs
3175 West Sixth Street, Room 310
Los Angeles, CA 90020
Attn: Lorena Bautista

If you have any questions regarding this Directive, please contact Lorena Bautista at (213) 738-3862 or email at lbautist@co.la.ca.us. Your cooperation in this matter would be greatly appreciated.


JOSIE MARQUEZ, Director
Employment and Training

Attachments

**COUNTY OF LOS ANGELES – COMMUNITY AND SENIOR SERVICES
WORKFORCE INVESTMENT ACT
FINAL FINAL REQUEST FOR CASH**

Agency:			CSS STAFF USE ONLY	
Address:			Program Staff Review:	Date:
City:	State:	Zip:	Fiscal Review:	Date:
Contract No.:	Adult	Dislocated Worker	Fiscal Approval:	Date:
Request Period:	Req. No.:	Amount Paid:	Enc. No.:	

COST REIMBURSEMENT						
	Administration Cost ≤ 3%	Program Costs				Grand TOTAL
		Core A	Core B	Intensive	Training	
CURRENT BUDGET						
Cash Received						
Cash Disbursed						
Cash Balance						
Cash Requested						

I certify that the information in this statement is correct to the best of my knowledge and the expenditures reflected herein are made in accordance with conditions of the subcontract. I also certify that all required payroll tax and income tax monies have been withheld from wages of persons employed by this organization to this date, and such funds have been held in a reserve fund or transmitted to local, state or federal officials as required by appropriate laws. I, as the authorized representative for this agency, by submitting this document attest to the truth and authenticity of the claims made and support documents represented.

Prepared By: _____ Title: _____
Date: _____ Phone: _____

Authorized Signature: _____ Date: _____

**COUNTY OF LOS ANGELES - COMMUNITY AND SENIOR SERVICES
WORKFORCE INVESTMENT ACT
FINAL FINAL INVOICE**

CONTRACT#: _____

Adult: Dislocated Worker:

Invoice Period: _____

Agency Name: _____

Prepared By: _____

Phone: _____

CHARGES	RECAP OF COSTS					TOTAL
	Administration Cost ≤ 3%	Program				
		Core A	Core B	Intensive	Training	
Current Budget						
Prior Period						
Current Period						
Cumulative						
Projected Operating Expenses*	0	0	0	0	0	0
Total						

*Projected operating expenses must show up for the following month in the GL, reflecting that the expenses were booked. **Final Final invoice is not to have projected expenses**

Comments: _____

**COUNTY OF LOS ANGELES – COMMUNITY AND SENIOR SERVICES
WIA ADULT AND DISLOCATED WORKER PROGRAM
FINAL – FINAL CLOSEOUT
2002-2003**

CONTRACT#: _____

Agency Name: _____

As part of the WIA Adult and Dislocated Worker Program Directive D-DWA-02-025, our agency submitted a Final Closeout report.

- The Final Closeout report submitted for WIA Adult and Dislocated Worker Program contained all actual expenditures and that report was the Final – Final.
- The Final Closeout report submitted for WIA Adult and Dislocated Worker Program contained accrued expenditures and the Final – Final Closeout Package is attached and a check is enclosed if required.

I, as the authorized representative for this agency, by submitting this document attest to the truth and authenticity of the claims made and support documents represented.

Authorized Signature: _____ Date: _____

Name (Print): _____ Title: _____