



Online Invoicing User Manual

For programs:

Continuum of Care Performance

Emergency Homeless Assistance

Rental Assistance Program

September 2014

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A. GETTING STARTED

To get started, you will need the following:

1. A computer with Internet Explorer or Chrome browser and the most current version of Adobe Flash player installed.
 - a. Please note that Internet Explorer must be in compatibility mode: instructions are available from the Online Invoicing site on how to enable compatibility mode.
2. The Online Invoicing address: <http://local.housingnm.org/LoginPortal>
3. Once you have these set up, you can register as a new user, create, edit, submit requests for reimbursement, and run reports.

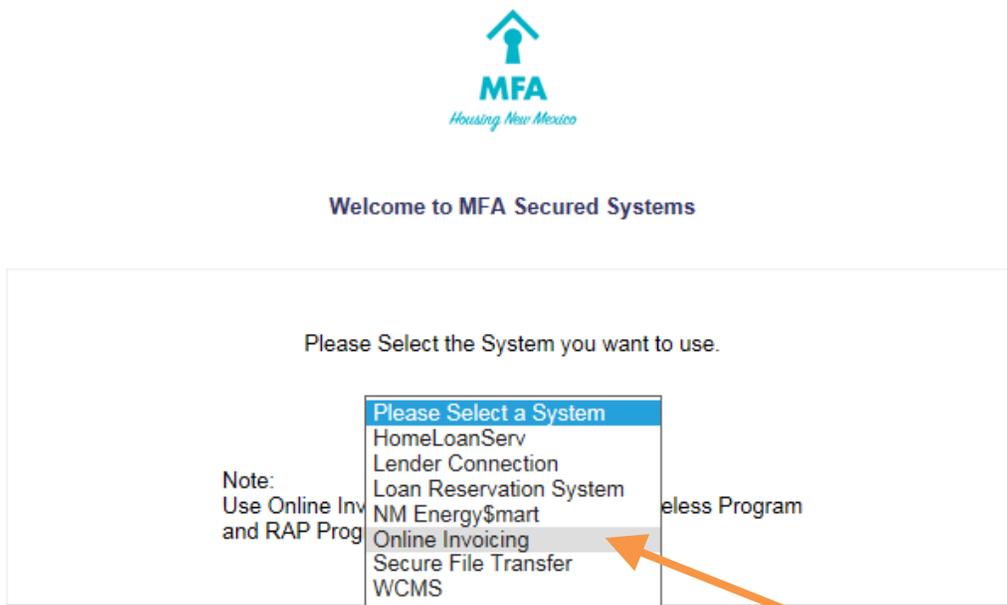
B. REGISTER A NEW USER

Each user of the system needs an individual account, which must be approved by MFA. If a staff person leaves, MFA must be notified immediately.

1. To register a new user, go to <http://www.housingnm.org/> and select "Secure Login" or <http://local.housingnm.org/LoginPortal>. You will see the Welcome Screen:



2. Select "Online Invoicing"



- 3. Then click the link for "New User Registration".



Welcome to MFA Secured Systems

Please enter your login information and click "Login" to continue.

User Name:

Password:

[Forgot Password](#) [New User Registration](#)

- 4. Please complete the User Registration form. Clarification of each field can be obtained by selecting "Click HERE for help."

New User Registration *All fields are required.

[Click HERE for Help](#) Please choose a login name with no spaces and Symbols

Requested Login Name: upto 15 Characters

First Name:

Last Name:

Service Provider:

Phone Number:

The password must be between 8 to 12 characters, and must contain at least one number and one letter with no symbol!

Password:

ReType Password:

Email:

Requested Access Level: Edit & submit scope of work to MFA
 Complete & sign invoice
 Complete & sign monthly reports
 View only
 Submit invoice and monthly reports to MFA

Select Security Question:

Answer:

Code:

Enter Code (above):

[Go back to login page](#)

5. The account and access levels are subject to confirmation by MFA. You will receive an email that your request has been submitted. It may take up to two business days to confirm your account. Once it has been confirmed, you will receive another email that your account has been approved. Confirmation may include MFA staff contacting the supervisor or director at your agency to verify access.

C. LOG IN TO THE ONLINE INVOICING SYSTEM

1. Once approved, you may log in to the online invoicing system at <http://local.housingnm.org/LoginPortal/>. You will see the Welcome Screen:



Welcome to MFA Secured Systems

Please enter your login information and click "Login" to continue.

User Name:

Password:

[Forgot Password](#) [New User Registration](#)

2. Enter your user name and password then click Login. If you do not have a user name, please Register as a New User (see Section A, Register a New User).
3. If your user name and password are correct, you are now logged in. If your user name and/or password are not correct, you will see the following message at the bottom of the screen:

Invalid Username and/or password, please try again.

Login attempt #1.

Warning! You will be locked out after 3 invalid login attempts.

If you are locked out, you will need to call the MFA Program Manager to unlock your account.

D. RESET PASSWORD

1. If your account is locked out, you will need to call the MFA Program Manager to unlock your account **before** you can reset your password.
2. To reset your password, use Internet Explorer to go to <http://local.housingnm.org/LoginPortal/>. You will see the Welcome Screen:



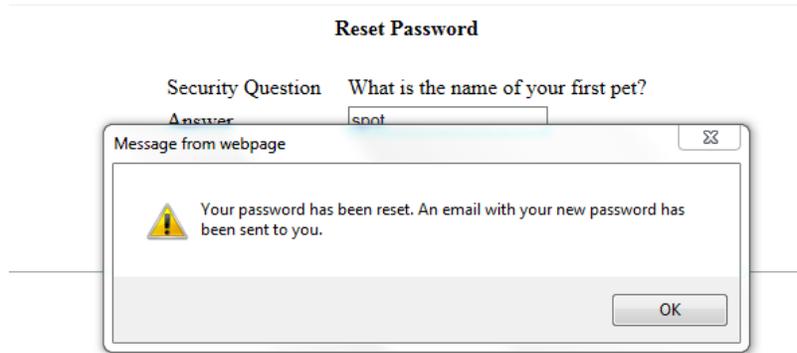
3. Type in your user name.
4. Click "Forgot Password". You will see the Reset Password Screen with your security question:



5. Enter the answer to your security question (the one you selected when you registered for the account), then click Submit.
6. You will then see a window letting you know that a new password has been emailed to you:



Welcome to MFA Secured Systems



7. Check your email to find this new password; the email will be from webnotifier@housingnm.org, and the password will be random letters and numbers.
8. Write down or copy this new password, and go to the Welcome Screen in Internet Explorer <https://local.housingnm.org/onlineinvoice/Login.aspx>
9. Enter your user name and the new password, then click login.
10. You will then see the Change Password Screen:

Change Password

Change Password for user: dataentry

The new password must be between 8 to 12 characters, and must contain at least one number and one letter. It cannot be the same as the old password.

New Password

Verify New Password

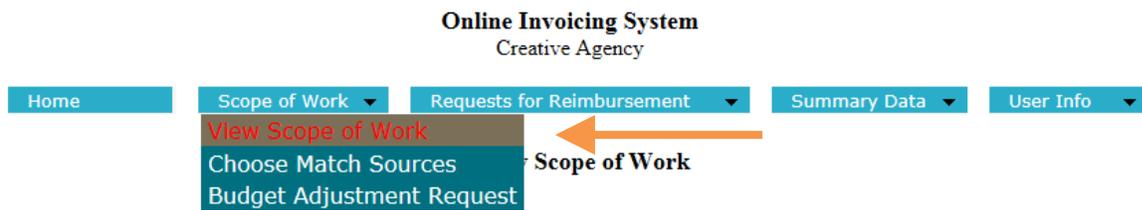


11. Choose a new password, following the guidelines, and enter it in New Password.

12. Enter the new password again in Verify New Password then click Change. **Please write your new password down** for future reference.

E. VIEW SCOPE OF WORK: ACTIVITY BUDGETS

1. To view your agency’s current scope of work, activity budgets and match sources for contracts in the Online Invoicing System, choose “View Scope of Work” from the Scope of Work Menu:



2. You will then see your agency’s contract, year & scope of work. If there is not a contract number or scope of work showing, please select the appropriate year.

View Scope of Work

Choose the contract year: 2014 ▼

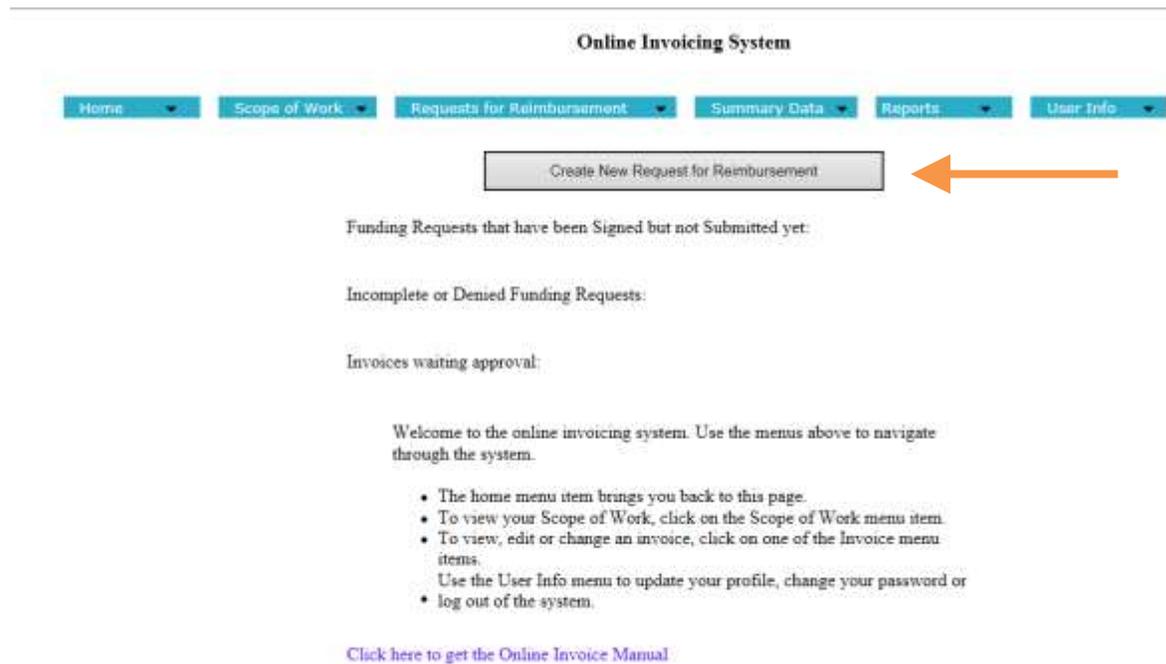
Contract Number 14-02-CRV-EHA-001 ▼

Program Type	Approved Award Amount	Match Source
Data Collection (HMIS)	\$2,000.00	Bernalillo County
Data Collection (HMIS)	\$3,000.00	Bernalillo County
Emergency Shelter Essential Services	\$2,000.00	Bernalillo County CDBG City of Las Cruces Health and Human Services funds
Rapid Re-Housing Financial Assistance	\$1,610.00	Bernalillo County

F. CREATE A NEW REQUEST FOR REIMBURSEMENT

Each request includes two components, the invoice and one or more reports. Reports are for each activity funded. To enter either an invoice or a report, the request first needs to be created.

1. To create a new Request for Reimbursement, log in to the system.
2. You will then see your agency’s Home Screen.
3. If there are no requests already created, you will see the button **“Create New Request for Reimbursement.”**



4. You can also find the “Requests for Reimbursement” drop down tab in the main menu bar and click “Create New Request.”



5. You will then see the Create New Request Screen:

Create New Monthly Funding Request

Request Type: Normal

Select Contract: 14-02-CRV-EHA-001

Reporting Month: 10/01/2014

Create Request

6. First, select the Request Type (**Normal** or **Addendum** Invoice). A normal request should be filed each month. An addendum request is used to make corrections or report additional information.
7. Then select the **Contract Number** for the funding you are requesting.
8. Then choose the **Reporting Month** from the options provided in the drop-down, which should only be months for which a request has not yet been submitted. The Reporting Month is the month in which the expenses were incurred and the services took place.
9. Finally, click the **“Create Request”** button. You will then see the Request Created Screen.
10. You will see buttons to **“Enter Invoice”** and **“Enter Monthly Report”** depending on your account permissions – for example, if you do not have access to the invoice, you will not see that button.

Funding Request created for October 2014.

Would you like to start with the invoice or monthly report?

Enter Invoice

Enter Monthly Report

11. Click **“Enter Invoice”** to enter expenditures for the selected month, or click **“Monthly Report”** to enter monthly report data. You may begin with either option; specific instructions for each are in this manual.

G. ENTER AN INVOICE

- Once you have reached the Invoice Screen, you will see your agency's funding activities and budget for each activity:

Online Invoicing System
Creative Agency

[Home](#) | [Scope of Work](#) | [Requests for Reimbursement](#) | [Summary Data](#) | [User Info](#)

Method of Payment (Check one): Direct Deposit Check

Emergency Homeless Assistance Program
 Request for Reimbursement
 2014 to 2013 Program Year
 Type: Normal

[Help](#)

Before you submit your first request, verify that your budget matches your contract:
 1- Go to the "Scope of Work" menu and click "View Scope of Work"
 2- If the budget doesn't match the contract, go to the "Scope of work" menu and click on "Budget Adjustment Request", to update your budget

Month: **October 2014** Invoice #: 2598 Contract #: 14-02-CRY-EHA-001

Activity	Budget	Current Expenditures	Year-to-Date Expenditures	Remaining Budget	% Utilized	YTD Match Amount	Required Match	Match Information Current YTD Source
Emergency Shelter Essential Services	\$2,000.00	\$0.00	\$700.00	\$1,300.00	35.00 %	\$100.00	\$2,000.00	\$0.00 Bernalillo County AMI
Rapid Re-Housing Financial Assistance	\$1,610.00	\$0.00	\$0.00	\$1,610.00	0.00 %	\$0.00	\$1,610.00	\$0.00 Bernalillo County AMI
Data Collection (HHS)	\$2,000.00	\$0.00	\$0.00	\$2,000.00	0.00 %	\$0.00	\$2,000.00	\$0.00 Bernalillo County AMI
Data Collection (HHS)	\$3,000.00	\$0.00	\$500.00	\$2,500.00	16.67 %	\$0.00	\$3,000.00	\$0.00 Bernalillo County AMI
Total	\$8,610.00	\$0.00	\$1,200.00	\$7,410.00		\$100.00	\$100.00	

WARNINGS

Comments/Notes (0 or less entered)

For non-domestic violence agencies: Export an APR on this month and this program from HHS, and then upload it here. Please call NACHE at (305) 962-9600 with questions on HHS.

(Note: to upload documents, you need to install Adobe Flash Player. If you do not see a Upload document box under this text, you can download Flash Player from

Upload Files

File

Uploaded Documents

Notes to agency on Approve or Deny

I have verified the information above.

2. To enter the amount to bill, click each box under the “**Current Expenditures**” column, and enter expenditure amounts for each program activity. For activities in which no expenditures were made during that month, enter \$0.00.
3. To enter the **match** amount, type in the dollar amount, select the source from the drop down, and then click “Add”. You will need to click “**Add**” after entering each item.
4. If there is anything unusual in the invoice, please type a comment in the “**Comments/Notes**” box.
5. Once you have entered all of the information, click “**Save Invoice**”.
6. If you see warnings at the bottom of the screen, as in the figure below, review them and make the corrections needed. For example, there will be a warning if the year-to-date match amount is less than the year-to-date expenses. You can correct this by adding additional match, or by including a comment explaining your agency’s situation and your expectations for match that will be available in future months.

Month	January 2011	Invoice #	778	Contract #	10-02-ABC-TSS-004			
Activity	Budget	Current Expenditures	Year-to-Date Expenditures	Remaining Budget	% Utilized	Match Information		
						Current	YTD	Source
Permanent Supportive Housing	\$15,000.00	\$0.00	\$10,605.00	\$4,395.00	70.7%	\$2,000.00	\$2,000.00	Donations
						Total	\$2,000.00	\$2,000.00
							\$0.00	Donations
							\$0.00	Donations
Homeless Prevention Only	\$25,285.00	\$0.00	\$17,116.00	\$8,169.00	32.31%			
Essential Services Only	\$20,000.00	\$0.00	\$19,883.00	\$9,117.00	54.2%			
Continuum of Care Match	\$21,642.00	\$0.00	\$3,842.00	\$7,800.00	16.04%			
Total	\$81,927.00	\$0.00	\$52,396.00	\$28,901.00				

WARNING:

- Permanent Supportive Housing - expenditures of \$10,605.00 is greater than the match of \$2,000.00
- Homeless Prevention Only - expenditures of \$17,116.00 is greater than the match of \$0.00
- Essential Services Only - expenditures of \$19,883.00 is greater than the match of \$0.00

* Use the Budget to add edit remove a match source

7. Once any corrections have been made, you can complete the invoice portion by clicking “**Sign Invoice**”. You will then see the Sign Invoice Screen:

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[Home](#) [Scope of Work](#) ▼ [Requests for Reimbursement](#) ▼ [Summary Data](#) ▼ [User Info](#) ▼

Sign Invoice



Month Reported October 2014

Contract Number 14-02-CRV-EHA-001

I hereby certify that the total amount due of \$5,200.00 is true, correct and was expended in the performance of services related to the completion of the scope of work under the above referenced Contract.

First Name

Last Name

Username

←

8. When the Sign Invoice Screen appears, enter your first and last name, capitalizing the first letter of both, and click the “**Sign Invoice**” button. You will receive a pop-up message that the invoice has been successfully signed.
9. Now that the invoice has been signed it will need to be verified and the **Monthly Report** needs to be completed before it can be submitted.

H. ENTER A MONTHLY REPORT

1. To create or edit Monthly Reports, you can log in to the system and see any available reports in your agency's Home Screen (see Enter an Invoice), or start by clicking on the **"View/Edit Request(s)"** option under the "Requests for Reimbursement" drop-down tab in the main menu bar.
2. From the View Request(s) Screen, click the **"Monthly Report"** link in the row that corresponds to the month you are editing.

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View Request(s)

Program Year: View:

Month	Invoice	Monthly Report	Type	Invoice Status	Report Status	Submitted	Program Type	Submitted By	Date Submitted	Date Approved	Date Denied	Date Disbursed
Nov 2014	Invoice	Monthly Report	Normal	■■■■■■■■■■			ESG					
Oct 2014	Invoice	Monthly Report	Normal	■■■■■■■■■■			ESG					
Sep 2014	Invoice	Monthly Report	Normal	■■■■■■■■■■			ESG					
Aug 2014	Invoice	Monthly Report	Normal	■■■■■■■■■■	■■■■■■■■■■	✓	ESG	datentry	08-12-2014	08-12-2014		08-12-2014
Jul 2014	Invoice	Monthly Report	Normal	■■■■■■■■■■	■■■■■■■■■■	✓	ESG	datentry	08-12-2014	08-12-2014		08-12-2014

3. You will then be directed to the Monthly Report screen. The Month Reported and Contract Number should appear at the top right of the screen.
4. From the **"Select Activity"** drop-down tab near the top of the screen, choose the activity for which you plan to enter data.

Online Invoicing System
Creative Agency

[Home](#) | [Scope of Work](#) | [Requests for Reimbursement](#) | [Summary Data](#) | [User Info](#)

Select Activity

[Help](#)

Monthly Report

Month Reported **November 2014**

Contract Number **14-02-CRV-EHA-001**

Numbers Won't show up until you select an activity above.

Activity Status: Emergency Shelter Essential Services Rapid Re-Housing Financial Assistance 0 out of 2 activities completed - 0.00 % Complete

Choose an activity (above) ...

- Once an activity is selected, you will have editing capabilities in the form below. Enter data in each of the white boxes shown in the Monthly Report form. If there is no data to report for a particular activity that month, enter zeros.

The screenshot shows the 'Online Invoicing System' interface for 'Creative Agency'. At the top, there are 'Save' and 'Back' buttons, a 'Select Activity' dropdown menu set to 'Emergency Shelter Essential Services', and a 'Help' link. The 'Monthly Report' section shows 'Month Reported' as 'November 2014' and 'Contract Number' as '14-02-CRV-EHA-001'. Below this is a progress bar for 'Activity Status' showing '0 out of 2 activities completed - 0.00 % Complete'. The main form is titled 'Activity 3: Emergency Shelter Essential Services' and contains a table for 'Residential Non-Residential Total' with 'Unduplicated' and 'Duplicated' rows. Below the table are tabs for 'Race and Ethnicity', 'Household and Gender', 'Target Population', 'Residential Only', and 'Exit Information'. The 'Race and Ethnicity' tab is active, showing a table for 'UNDUPLICATED Client Racial/Ethnic Characteristics' with columns for 'TOTAL', 'Hispanic', and 'Non-Hispanic'. A warning message is displayed below the table, and a 'Comments/Notes' box is at the bottom. At the very bottom, there are 'Save', 'Sign', 'Go to Invoice', and 'Undo' buttons, along with a checkbox for 'I have verified the information above'.

- As you begin entering data in **each tab** (Race and Ethnicity, Household and Gender, Target Population, Residential Only, and Exit Information) of the Monthly Report form, notes and warnings may appear at the bottom of the screen. These will direct your attention to deficiencies or errors in the data you have entered.
- If you have comments to add to the report, enter these in the “**Comments/Notes**” box below the report form and any warnings.
- Please note: In order to protect your data from accidental deletion, please **remember to save** frequently by clicking either of the “Save” buttons, located at the top left and bottom left of the screen. The date and time when the report was last saved will be noted at the bottom of the screen.

9. As each activity's Monthly Report is completed and saved, the "Activity Status" of that particular activity will change from red to **green** at the top of the Monthly Report form.

Online Invoicing System
Creative Agency



Select Activity:

[Help](#)

Monthly Report
 Month Reported: [November 2014](#)
 Contract Number: [14-02-CRV-EHA-001](#)

Activity Status: Emergency Shelter Essential Services Fajal Re-Thinking Financial Assistance 2 out of 2 activities completed - 100.00 % Complete

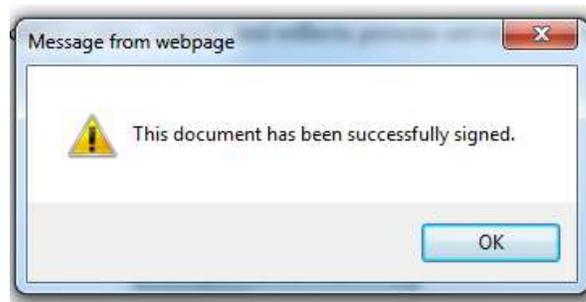
Activity 3: Emergency Shelter Essential Services



10. Once all of the data has been entered, the report for each activity must be signed prior to submission. The report can only be signed once **all** activities are completed. Please make sure all the activities have been reported. This is especially important for an agency with assigned tasks or different levels of authorization. Once the boxes are green, the person authorized to sign can submit the entire report.
11. To sign an activity's report, click the "**Sign**" button below the "Comments/Notes" box at the bottom of the screen.

12. When the Sign Monthly Report Screen appears, enter your first and last name, capitalizing the first letter of both, and click the “**Sign Monthly Report**” button.

13. You will receive a pop-up message that the report has been successfully signed.



I. ENTER MONTHLY REPORT DATA

When Reporting is Required

Any time an agency is using one of the four (4) program activities' funds (Emergency Shelter Operations, Homeless Prevention, Essential Services, and Continuum of Care Performance), **a monthly report on that activity is required.** This includes agencies that are using multiple activities which they have allocated out of Emergency Shelter Operations funds. The clients reported must be those whose assistance is provided from the activity funds.

Monthly reports are required for every month of the contract year, even after funds have been fully expended. Agencies with ongoing activities, for example, emergency shelters, will report clients served for the whole year, regardless of whether funds are expended in that month.

Unduplicated and Duplicated

Reporting of unduplicated and duplicated clients will vary based on which activity is being reported.

Activities are reported in this order:

1. Emergency Shelter Operations (SHO)
2. Homeless Prevention (HMP)
3. Essential Services Only (ESS)
4. Continuum of Care Performance (COC)

Unduplicated

For the first activity listed for any agency, each **new client served that month** will be reported as unduplicated. New clients are those who have not received any services since June 30 of the previous contract year. **On July 1 each year, every client receiving services is counted as new.**

For example, RAP agencies will report all new Homeless Prevention clients each month as unduplicated; Emergency Shelters will report all new shelter residents each month as unduplicated. Continuum of Care agencies will report all new clients receiving Shelter plus Care services as unduplicated.

Duplicated

As clients receive services from additional activities, they are reported as duplicated.

For example, RAP agencies will report all new Homeless Prevention clients under Essential Services as duplicated, because the clients are being reported twice – once for each activity. RAP agencies will report all new clients receiving Essential Services without receiving Homeless Prevention as unduplicated, because those clients are only being reported once.

There is no place in the reports to count people who receive services in more than one month in the year.

Additional examples:

- If an agency has only 1 activity, then all new clients are unduplicated, and NO duplicated clients should be reported.
- If a client is new in August and reported as unduplicated, and then in October returns and receives services under the same activity, the client is not reported.
- If a client was reported as unduplicated for an activity in August, and then in October receives services under another activity, the client is reported as duplicated in the second activity.

Definitions by activity:

1. Emergency Shelter Operations (SHO) – New clients who have received Emergency Shelter Operations assistance should be counted as unduplicated. If the client was already reported under Emergency Shelter Operations this year, then the client should not be reported again.
2. Homeless Prevention (HMP) – New clients who have received only Homeless Prevention assistance should be counted as unduplicated. If the client was already reported under Emergency Shelter Operations this year, then the client should be counted as duplicated. If the client was already reported under Homeless Prevention this year, then the client should not be reported again.
3. Essential Services Only (ESS) – New clients who have received only Essential Services should be counted as unduplicated. If the client was already reported this year under Emergency Shelter Operations or under

Homeless Prevention, then the client should be counted as duplicated. If the client was already reported under Essential Services this year, then the client should not be reported again.

4. Continuum of Care (COC) – New clients who have received only Continuum of Care Performance assistance should be counted as unduplicated. If the client has already been reported this year under Emergency Shelter Operations, Homeless Prevention or Essential Services, then the client should be counted as duplicated. If the client was already reported under Continuum of Care Performance this year, then the client should not be reported again.

Residential / Non Residential Clients

Residential clients are the clients who stay overnight when operations of the overnight facility are paid with MFA program funds. Non-residential clients are clients who receive assistance, but do not stay overnight.

Definitions by activity:

1. Emergency Shelter Operations – clients who stay overnight are Residential, all others are Non-Residential
2. Homeless Prevention – All clients are Non-Residential
3. Essential Services – All clients are Non-Residential
4. Continuum of Care Performance – clients are Residential if MFA funds are used to pay for operating expenses of a housing facility. All other clients are Non-Residential.

Race and Ethnicity

Race and ethnicity must be reported for all unduplicated clients. The total of all races & ethnicities reported must equal the total number of unduplicated clients.

Household and Gender

Membership in a household must be reported for all unduplicated clients. There are two types of households: adult-only households and households with children under 18. Adult children 18 and over are not counted as children, but as adults. The total number of people in households must equal the total number of unduplicated clients.

The total number of households must also be reported. Each single individual is counted as a household, and each family is counted as a household. Based on the number of people reported in each household type, the reporting form will estimate the total number of households, which may be different from the total you enter due to varying family arrangements.

Target Population

Target population must be reported for all unduplicated clients. A given client may be in one or more target populations; the total does not need to equal the total unduplicated clients.

The categories are:

1. Chronically homeless – anyone who has been homeless for at least 12 consecutive months, or who has had 4 episodes of homelessness (staying in a shelter or on the streets) in the past 3 years.
2. Severely mentally ill – anyone who has a diagnosed severe mental illness.
3. Chronic substance abuse – anyone who has a chronic substance abuse issue.
4. Other disability – anyone with a physical, developmental, or other disability not included above.
5. Veterans – anyone who has served in the military, regardless of discharge status.
6. Persons with HIV/AIDS – anyone with an HIV/AIDS diagnosis.

7. Elderly – anyone over 62.

Residential Only

This tab is only available for agencies with Emergency Shelter Operations or Continuum of Care Performance.

Current Shelter/Housing Type

Current Shelter/Housing type information must be reported for all **unduplicated residential** clients. These should be reported based on the agency's facilities where the clients are staying this month, not based on destination when the clients leave. For Continuum of Care Performance agencies, if there are no residential clients, this does not need to be reported.

The categories are:

1. Barracks – clients are staying in 1 or more large rooms with multiple beds.
2. Group/large home – clients are staying in the facility which is set up like a large home, with no more than 1 or 2 clients per bedroom.
3. Scattered site apartments – clients are living in their own apartments.
4. Single family detached house – clients are living in their own single family homes
5. Single room occupancy – clients are living in individual rooms in a multiple resident building, with shared bathrooms and kitchens, or rooms may have kitchenettes and/or half-baths.
6. Hotel/motel – clients are living in hotels or motels. The residential programs cannot pay for hotel or motel stays, so this category should not be used.
7. Mobile home/trailer – clients are living in a mobile home.
8. Other – any other living situation not described above. This category should not be used regularly, and if used, the living situation must be described in the Comments/Notes box.

Total Occupancy

Total Occupancy must be reported for agencies with Emergency Shelter Operations only, and does not differ based on clients' status as unduplicated or duplicated. There are two categories:

1. Bed spaces available – this is the total number of spaces available at an agency for a single night.
2. Total bed nights provided – this is the total number of nights of shelter provided; it should include all occupants, both those who are new (reported as unduplicated), and those who have either continued to stay or have returned (reported as unduplicated in a previous month, not reported in the current month).

Exit Information

Exit information must be reported for all unduplicated clients for the month in which they exit. The number does not need to match the total unduplicated clients, as clients do not necessarily exit in the same month they entered.

Exit information is also reported by household. Every single person is a household, and every family is a household. For example, a couple is 2 persons and 1 household. A family of 5 is 5 persons and 1 household.

There are 3 categories:

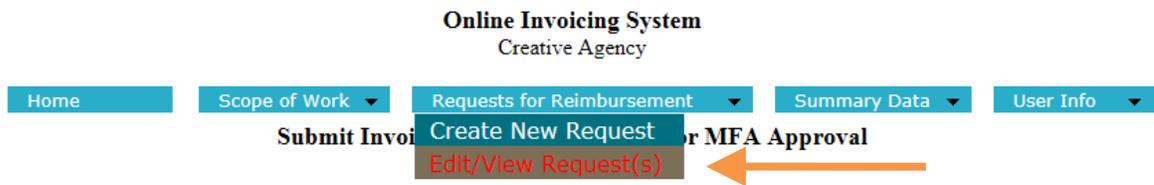
1. Exited to Transitional Housing - this means the clients exited to one of the following: Shelter Plus Care (if there is a maximum length of stay), Supportive Housing Program (if there is a maximum length of stay), HOME TBRA program, HPRP, Moved in with family or friends on a temporary basis. Can include a person who is going back to a formerly abusive situation if the situation is now relatively safe but is unstable.

2. Exited to Permanent Housing - this means the clients exited to one of the following: Rental house or apartment (no subsidy), Public Housing, Section 8, Shelter Plus Care (no time limit), Supportive Housing Program (no time limit), HOME subsidized house or apartment, Other subsidized house or apartment, Homeownership, Moved in with family or friends on a permanent basis. Can include a person who is going back to a formerly abusive situation if the situation is now relatively safe and stable.
3. Exited to Other/Unknown – this means the client did not exit to Transitional or Permanent Housing, but instead was in another exit scenarios, including the client disappeared, went to jail, went to another shelter, went to a hotel or motel, passed away, or is going back to an abusive situation that is unsafe and/or unstable.

J. SUBMIT REQUEST FOR REIMBURSEMENT

Once the Invoice and all Monthly Reports have been completed, they need to be verified and submitted.

1. To begin the process, log in to the system.
2. From the Home Screen, you will see the pending requests. Click on the “**Edit/View Request(s)**” button.



3. Review all of the **invoice** information. If it is correct, check the check box below the Comments/Notes certifying that you have verified the information.

Month	Type	Invoice Status	Report Status	Submitted	Program Type	Submitted By	Date Submitted	Date Approved	Date Denied	Date Invoiced
Nov 2014	Invoice Monthly Report	Normal			ESG					
Oct 2014	Invoice Monthly Report	Normal			ESG					
Sep 2014	Invoice Monthly Report	Normal			ESG					
Aug 2014	Invoice Monthly Report	Normal		<input checked="" type="checkbox"/>	ESG	datamtry	08/12/2014	08/12/2014		08/12/2014
Jul 2014	Invoice Monthly Report	Normal		<input checked="" type="checkbox"/>	ESG	datamtry	08/12/2014	08/12/2014		08/12/2014

4. If there are unique circumstances, please note it in the “**Comments**” section. This will help the reviewer in processing your request for reimbursement.

- 5. General ledgers, invoices, data reports from HMIS and or Osnum must be uploaded to the **“Uploaded Documents”** section.



- 6. Click on the **“Go to Monthly Report”** button.



- You will now see the **Monthly Report** screen. Select the activity to review the information.

Online Invoicing System
Creative Agency

Home | Scope of Work | Requests for Reimbursement | Summary Data | User Info

Monthly Report 

Month Reported **November 2014**
Contract Number **14-02-CRV-EHA-001**

Activity: Select

Activity Status Emergency Shelter Essential Services Rapid Re-Housing Financial Assistance 2 out of 2 activities completed - 100.00 % Complete

- If it is correct, check the check box below the Comments/Notes certifying that you have reviewed the information.

Online Invoicing System
Creative Agency

Save | Back | Select Activity: Help

Monthly Report
Month Reported **November 2014**
Contract Number **14-02-CRV-EHA-001**

Activity Status Emergency Shelter Essential Services Rapid Re-Housing Financial Assistance 2 out of 2 activities completed - 100.00 % Complete

Activity 3: Emergency Shelter Essential Services

	Residential	Non-Residential	Total
Unduplicated	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Duplicated	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

Race and Ethnicity | Household and Gender | Target Population | **Residential Only** | Exit Information

Current Shelter/Housing Type		Total Occupancy	
Unduplicated Residential Clients			
<input type="text" value="0"/>	Barracks	Bed spaces available	<input type="text" value="0"/>
<input type="text" value="0"/>	Group/Large Home	Total bed nights provided	<input type="text" value="0"/>
<input type="text" value="0"/>	Scattered Site Apartments	Bednights available for 30 days	<input type="text" value="0"/>
<input type="text" value="0"/>	Single Family Detached House	Occupancy should include all overnight clients, those who are new this month (unduplicated) and those who are not new this month (they were reported as unduplicated in a previous month).	
<input type="text" value="0"/>	Single Room Occupancy		
<input type="text" value="0"/>	Hotel/Motel		
<input type="text" value="0"/>	Mobile Home/Trailer		
<input type="text" value="0"/>	Other		
<input type="text" value="0"/>	Total		

Warning – Please note that no clients have been reported in any of the categories under the Target Population tab. If this is unusual for your agency, please provide a comment below to explain. This report can still be signed and submitted.

Comments/Notes (0 of 500 characters)

I have verified the information above 

- 9. Repeat these two steps (5 & 6) for all activities. Upon verifying all activities, the monthly report needs to be signed.



I hereby certify that the information in the report(s) is true, correct, and reflects persons served under the Scope of Work for the above contract.

First Name
Last Name
Username dataentry



- 10. The system will then redirect you to the Submit Screen. Type in your First and Last Name (capitalized and properly spelled), then click "Submit to MFA."
- 11.

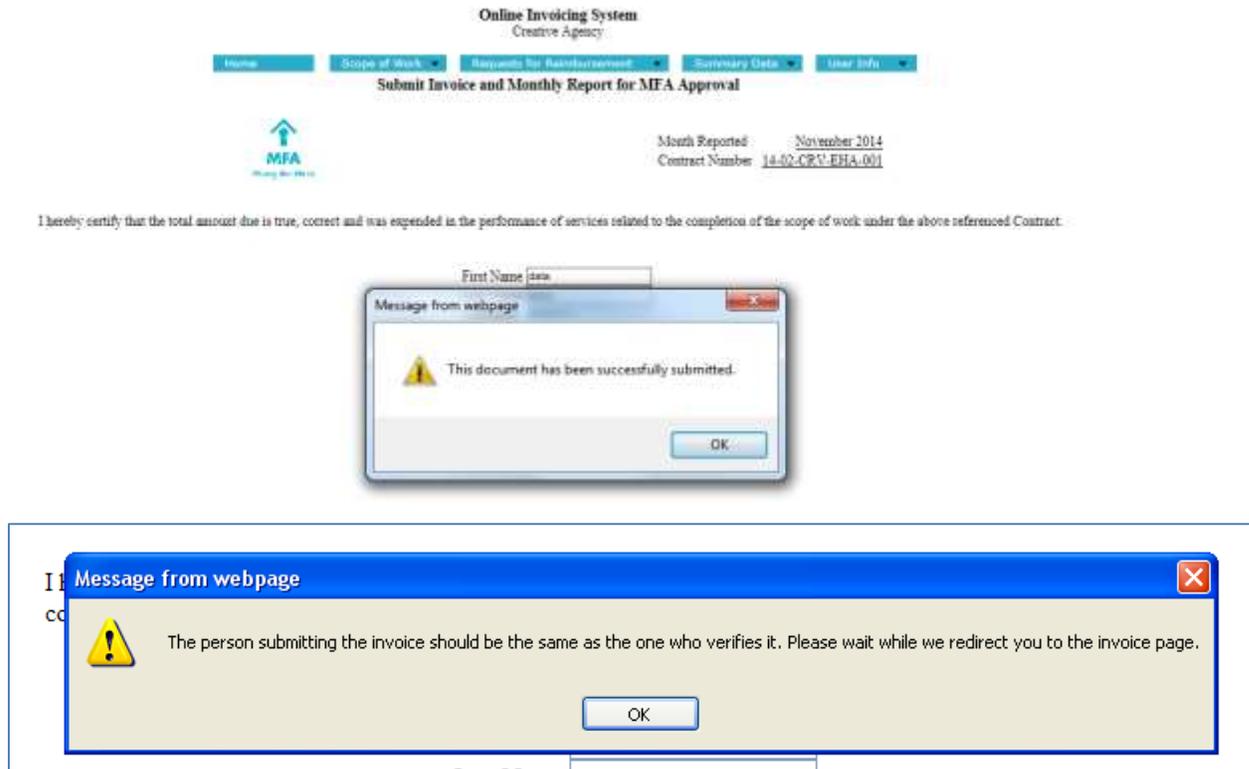


I hereby certify that the total amount due is true, correct and was expended in the performance of services related to the completion of the scope of work under the above referenced Contract.

First Name
Last Name
Username dataentry



12. The system will provide a message that the request has been submitted, **or** will provide a Verification Error Message:



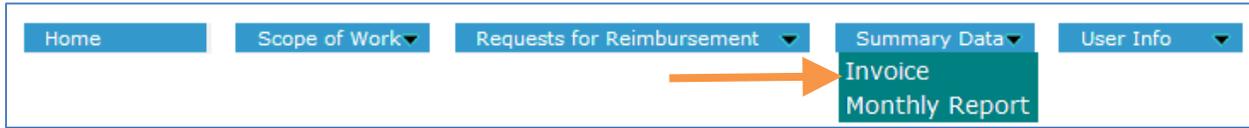
13. This message means that the either the invoice or one or more of the monthly reports have not been verified. You will need to go to the invoice and/or the reports, review the information, and check the checkboxes.
14. Once that correction has been made, the system will return you to the Submit Screen. You should now be able to submit.

K. RUN A SUMMARY REPORT

Summary reports on expenditure and reporting data can be run from the Summary Data menu. This menu also allows you to view, save or print final approved copies of invoices and reports.

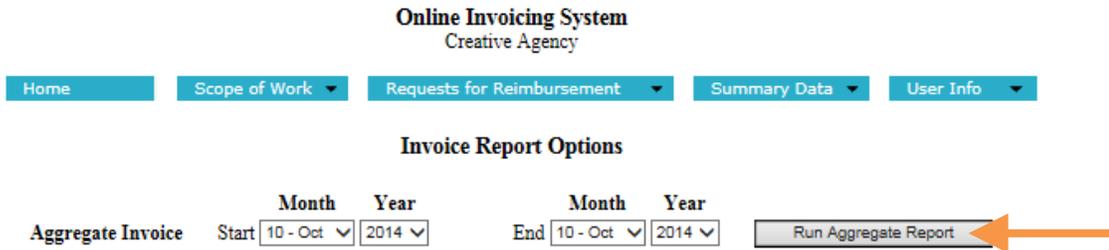
Summary Data – Invoices

1. To run a report on invoices, choose the Invoice item under Summary Data.



2. When you choose this item, you will see the Invoice Report Options (below) and Individual Invoice List:

3. To see totals across multiple months, choose the start month & year and the end month & year, and click the Run Aggregate Report button. The months are based on the month when service was provided.



4. A new window will open with the report; the report will include all expenditures for the months you selected, and the respective match amounts reported.

10/23/2014 11:25 AM

MFA
Raising Bar Services

Method of Payment: (Check one)
 Direct Deposit Check

Month: 11/2014
 Invoice #: 3424
 Contract #: 14-02-CRV-BHA-001

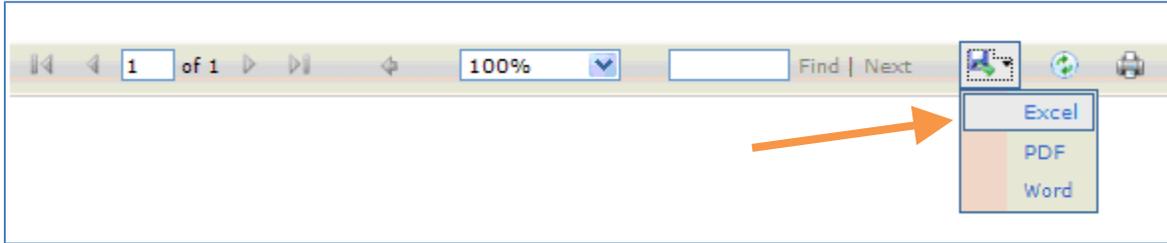
IDIG Number	Activity	Budget	Current Expenditures	YTD Expenditures	Remaining Budget	% Utilized	Match Source	YTD Match	Current Match
State	Emergency Shelter Essential Services	\$2,000.00	\$150.00	\$1,400.00	\$800.00	70.00%	CDBG: \$100.00 -> Beretillo Court: \$50.00	\$200.00	\$100.00
2234-2225	Rapid Re-Housing Financial Assistance	\$1,610.00	\$0.00	\$2,000.00	-\$390.00	124.22%	Beretillo County: \$0.00	\$0.00	\$0.00
2211	Data Collection (HMS)	\$5,000.00	\$0.00	\$3,000.00	\$2,000.00	125.00%		\$0.00	\$0.00
	Total	\$8,610.00	\$150.00	\$6,400.00	\$2,210.00	70.00%		\$200.00	\$100.00

Comments/Notes

I hereby certify that the total amount due of \$100.00 is true, correct and was expended in the performance of services related to the completion of the scope of work under the above referenced Professional Services Contract.

Date Entry 10/23/2014 11:17:00 AM
 Authorized Official: Signature & Date _____
 MFA Approval & Date _____

- 5. This report can be saved or printed, by using the menu at the top:



- 6. When you choose the Invoice option from the Summary data menu, you will also see the Individual Invoice list. From this list you can view any individual invoice to see the final information, by clicking the links at the right side:

Individual Invoice						
Invoice #	Year	Month	Method	Notes	Submitted	
902	2010	8	Direct Deposit	...		View #902
901	2010	7	Direct Deposit			View #901

- 7. The invoice will open in a new window, and can be saved or printed just like the reports.

Summary Data – Monthly Reports

- 1. The Monthly Report item under Summary Data allows you to run reports on the client demographics and numbers that have been reported, and also to print or export reports.

2. Once the Monthly Report item is selected, you will see the Monthly Report Data Screen:

Online Invoicing System
Creative Agency

Home Scope of Work Requests for Reimbursement Summary Data User Info

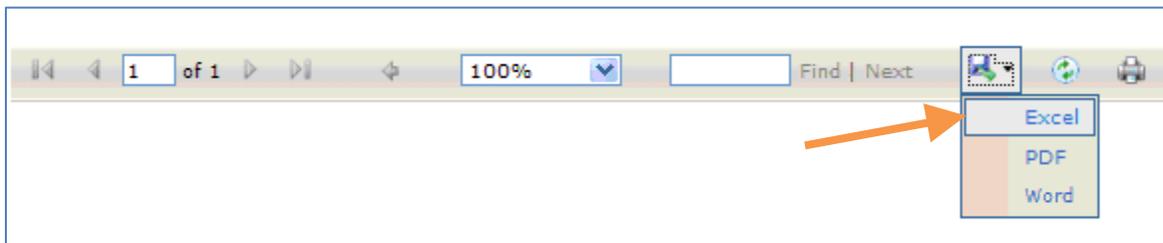
Monthly Report Options

Aggregate Monthly Report Start: Month 10 - Oct Year 2014 End: Month 10 - Oct Year 2014 Run Aggregate Report

Individual Monthly Report

Report ID	Year	Month	Create Date	Report Links
3424	2014	11	09/08/14	Emergency Shelter Essential Services Rapid Re-Housing Financial Assistance
3568	2014	10	10/28/14	Emergency Shelter Essential Services Rapid Re-Housing Financial Assistance
3538	2014	9	10/09/14	Emergency Shelter Essential Services Rapid Re-Housing Financial Assistance
3386	2014	8	08/12/14	Emergency Shelter Essential Services Rapid Re-Housing Financial Assistance
3385	2014	7	08/12/14	Emergency Shelter Essential Services Rapid Re-Housing Financial Assistance
2263	2013	1	01/08/13	Emergency Shelter Operations Emergency Shelter Essential Services
2264	2013	1	01/08/13	Emergency Shelter Operations Emergency Shelter Essential Services
2266	2013	1	01/08/13	Emergency Shelter Operations Continuum of Care Performance Permanent Supportive Housing Essential Services Homeless Preventic
2738	2013	1	08/30/13	Emergency Shelter Operations Emergency Shelter Essential Services
2237	2012	10	12/13/12	Emergency Shelter Operations Emergency Shelter Essential Services
2019	2012	8	09/10/12	Emergency Shelter Operations Emergency Shelter Essential Services
947	2011	4	04/11/11	Emergency Shelter Operations Continuum of Care Performance Permanent Supportive Housing Essential Services Homeless Preventic
954	2010	12	04/11/11	Emergency Shelter Operations Continuum of Care Performance Permanent Supportive Housing Essential Services Homeless Preventic

- To see totals across multiple months, choose the start month & year and the end month & year, and click the Run Aggregate Report button. The months are based on the month when service was provided.
- A new window will open with the report; the report will include all data for the month(s) selected.
- This report can be saved or printed, by using the menu at the top:



6. You can also view, save or print an individual monthly report, by clicking on the activity name in the list.

- The monthly report will open in a new window, and can be saved or printed.

				Contract # <u>13-01-CRV-RAP-001</u> Month Reported <u>November 2014</u>				
Activity 3: Emergency Shelter Essential Services								
Number of Persons Served				Emergency Shelters Only - Complete this box				
	Residential	Non-Residential	Total	Average bed spaces available	0			
Unduplicated	0	0	0	Total bed nights provided	0			
Duplicated	0	0	0					
----- Unduplicated Information Only, Below Dashed Line								
Ethnic & Racial Characteristics								
Total	Hispanic	Non-Hispanic						
0	0	0	White					
0	0	0	Black/African American					
0	0	0	Asian					
0	0	0	American Indian/Alaskan Native					
0	0	0	Native Hawaiian/Other Pacific Islander					
0	0	0	American Indian/Alaskan Native White					
0	0	0	Asian & White					
0	0	0	Black/African American & White					
0	0	0	American Indian/Alaskan Native & Black African American					
0	0	0	Other Multi-Racial					
<u>0</u>	<u>0</u>	<u>0</u>	Total					
Household and Gender Information								
<u># Persons in Adult-only Households</u>				Male	Female	Children	Total	Total # Adults:
Single 18 and over				0	0		0	

L. UPDATE USER PROFILE INFORMATION

- To update your user information, including your email, phone number and security question, go to the User Info Menu and click on Update Profile:



- You will then see the User Profile Screen:

Your Profile Information

User Name:	dataentry	First Name:	<input type="text"/>
Last Login Date	10/28/2014	Last Name:	<input type="text"/>
Service Provider:	Creative Agency	Email:	<input type="text"/>
		Phone#:	<input type="text"/>

- Please make sure your information is accurate, in the event MFA staff needs to contact you with a question about the request for reimbursement.
- You can also update your Security Question and Answer, shown below; please choose a question and answer you will remember. Please note that this information can be seen by authorized MFA staff.

Security Q&A

The following Question will be asked of you if you forget your password:

Question:

The following Answer is required to receive your password via email:

Answer: (10 Characters Max)

M. CHANGE PASSWORD

- To change your password, go to the User Info menu and click on “**Change Password**”:



2. Then you will see the “**Change Password**” page:

Change Password

The new password must be between 8 to 12 characters, contain one digit and one alphabetic character

Change Password for user: testapproval

Old Password

New Password

Verify New Password

3. You will need to type in your Old Password, and then type in your New Password. Your new password needs to be at least 8 characters long, include at least 1 letter and 1 number. It **cannot** be more than 12 characters long.

Every 90 days, the system will also prompt you to change your password.

N. LOGOFF FROM THE SYSTEM

When you are finished with your tasks, you will need to logoff from the system.

1. To logoff, go to the User Info Menu and click “Logoff”.

