

# Purchasing, Compliance, and Time & Effort

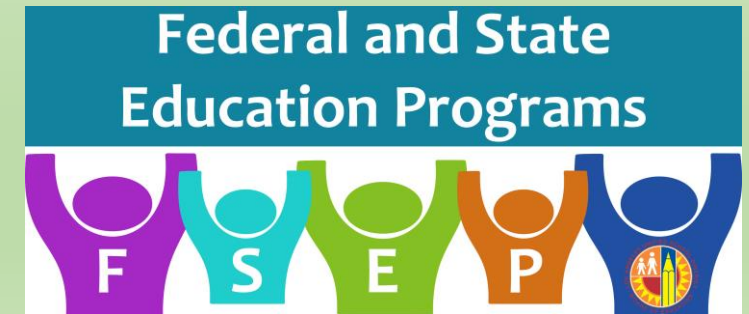
## Local District Central

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**Presenter:**

**José A. Jarquín**

**[jaj7955@lausd.net](mailto:jaj7955@lausd.net)**



# Objectives

**Participants will review/learn:**

- **The Title I program allowable expenditures**
- **The importance of providing the correct documentation when reconciling expenditures or ordering services**
- **The updated time and effort certifications for categorically funded employees**

# What is Title I

*“...is to provide all children significant opportunity to receive a fair, equitable, and high quality education, and to close educational achievement gaps.” Every Student Succeeds Act (ESSA), Title I, Part A, Section 1001*



# School Plan for Student Achievement

Los Angeles Unified School District  
*School Plan for Student Achievement*

2019-2020  
Implementation  
10TH ST EL (1708201)



**Superintendent**  
Austin Beutner

**Board Members**

Mónica Garcia, Board President  
Dr. George McKenna III  
Scott M. Schmerelson  
Nick Melvoin  
Kelly Gonez  
Dr. Richard A. Vladovic

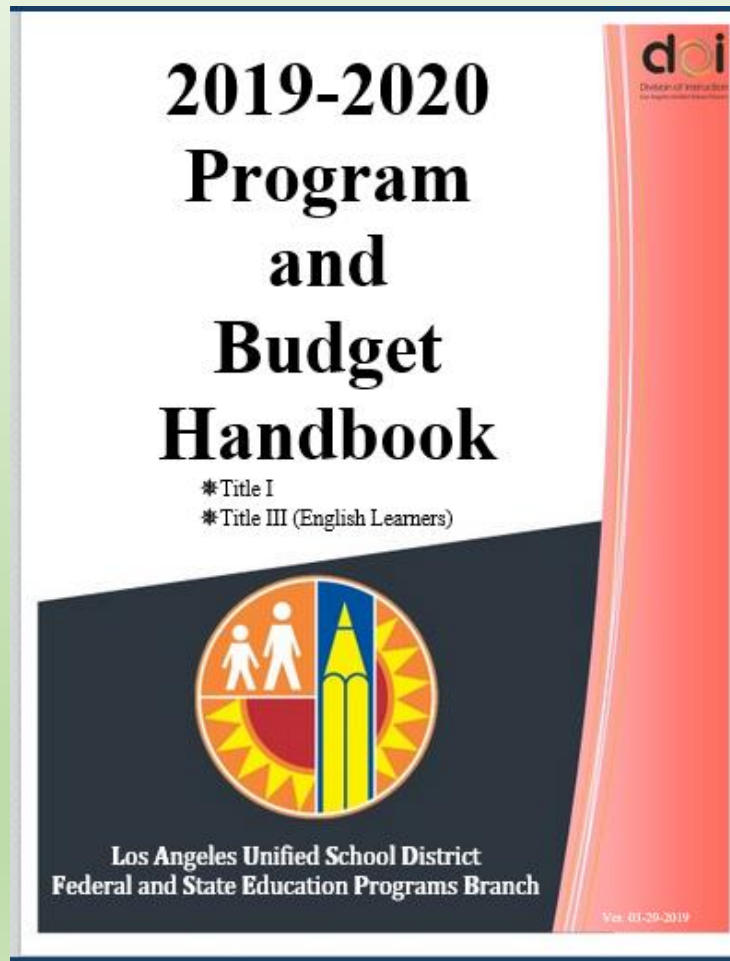
## What is it?

- Annual plan developed, updated, and evaluated by SSC
- The content of the plan aligns with goals for improving student achievement and addresses how funds will be used to improve academic performance

## Where can I find it?

- [School Directory](#) (School plan, budget reports, and other resources)

# Title I Allowable Costs



**The Program and Budget Handbook is a great resource to assist you in designing an effective instructional program for participating students.**

## Handout

# Title I Cheat Sheet

Los Angeles Unified School District  
2019-2020 Title I Program Cheat Sheet  
(7S046, 7E046, and 7T691)



When submitting a request to reconcile accounts or purchasing items using Title I funds, a SPSA page or SPSA Modification that specifically describes the purchase must accompany your request. The holder of the plan is usually the Principal and/or the Title I Designee at your school. They can provide the documents needed to complete your request. The cut-off date for all requests to reconcile accounts or purchase items with Title I funds is ★May 5, 2020★.

It contains procedures, deadlines, and specifies necessary documentation needed when conducting transactions with Title I funds.

- \* T-Card
- \* Imprest
- \* P-card
- \* Shopping Cart

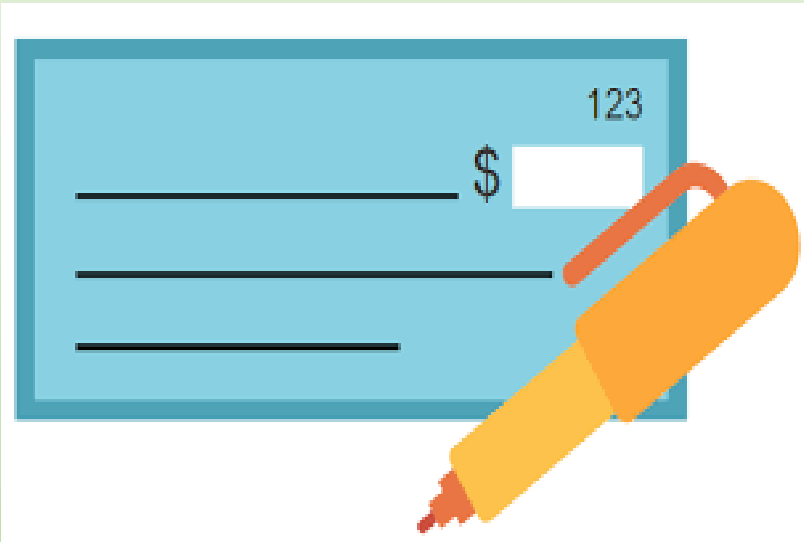
# Travel Card

- **Contract Bus Services**
- **Conference Expenses (airfare and lodging)**



**All reconciliations require  
SPSA/Modification pages**

# Imprest



- **Admission Fees to approved educational activities**
- **Conference Registration Fees**
- **Contract Bus Services to approved LAUSD locations**
- **Supplemental Instructional Materials-SIM**

**All reconciliations require SPSA/Modification pages**



# P-Card

- Admission Fees to approved educational activities
- Conference Registration Fees
- Supplemental Instructional Materials (SIM)
- Contract Bus Services to approved LAUSD locations
- Software License Maintenance (Renewals)
- Other Books



**All reconciliations require SPSA/SPSA Modification pages**

# Shopping Cart

- **Maintenance of Equipment (50% maximum with Title I)**
- **Rental of Equipment (50% maximum with Title I)**
- **Admission Fees (District approved sites)**
- **Contract Bus Services (District approved sites)**
- **Software License Maintenance (Renewal)**
- **Professional Services Instructional Contracts**
- **Other Books (submit list of books)**
- **M&O Supplies for Title I Interventions**
- **Supplemental Instructional Materials (SIM)**
- **Travel/Conference Attendance**

# Shopping Cart

- General Supplies Technology (Under \$500)
- Non-Cap Equipment (\$500-\$4,999)

**All Title I General Supplies-Technology and/or Non-Capitalized Equipment Shopping Carts, must be submitted in SAP by January 30<sup>th</sup> so equipment is received by May 5<sup>th</sup> of the current school year.**

# Correct documentation?



- **Conference Attendance (T-Card)**

- Invoice/receipt
- Conference flyer
- Approved Travel Request Notification (ATRN)
- **SPSA/SPSA Modification page(s)**

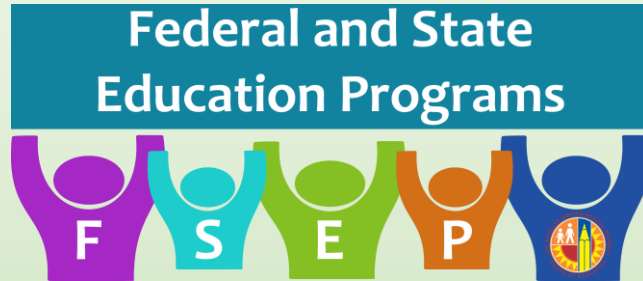
- **Supplemental Instructional Materials (Imprest)**

- Itemized invoice
- **SPSA/SPSA modification page(s)**

- Approved 34-EH-57 student field trip form
- Invoice/receipt with location
- **SPSA/SPSA Modification page(s)**

- Invoice listing all the books being purchased
- **SPSA/SPSA modification page(s)**

# Title I Program Reviews



Periodic

Annual

Biennial

Expenditures

Payroll

Time and Effort

Follow Title I guidelines to prevent receiving a payback letter

# Time and Effort

Federal Funds



Time Accounting



1. Periodic Certification  
(Attachments B1- B2)
2. Multi-funded Time Report  
(Attachment C)

**LEGAL DOCUMENTS**

BULLETIN NO. 2643.9  
July 1, 2019

ATTACHMENT B1

LOS ANGELES UNIFIED SCHOOL DISTRICT  
Accounting and Disbursements Division

**PERIODIC CERTIFICATION**

School/Office Name: \_\_\_\_\_

Program Name(s): \_\_\_\_\_ Program Code(s): \_\_\_\_\_

Cost Objective Name, if applicable: \_\_\_\_\_ [e.g., Title I Schoolwide plan (SWP)]

BULLETIN NO. 2643.9  
July 1, 2019

ATTACHMENT B2

LOS ANGELES UNIFIED SCHOOL DISTRICT  
Accounting and Disbursements Division

**PERIODIC CERTIFICATION**

(continued from previous page)

[The following basic information must be recorded on each additional sheet. Use this form only if necessary.]

Name

Position

\_\_\_\_\_

\_\_\_\_\_



# Multi-Funded? Multi-Funded Time Reports (MFTRs)

MULTI-FUNDED TIME REPORT*																																			
*Activities and programs can be edited for specific needs.																																			
Employee Name: _____										Class Code: _____										Month: _____															
Employee #: _____										Position: _____										School/Office: _____															
Program Name: Title I															Program Code: 7S046																				
Date:	M	T	W	TH	F	S	Su	M	T	W	TH	F	S	Su	M	T	W	TH	F	S	Su	M	T	W	TH	F	S	Su	M	T	W	TH	F	S	Su
# of Hrs																																			
Activity # (s)																																			
Program Name:															Program Code:																				
	M	T	W	TH	F	S	Su	M	T	W	TH	F	S	Su	M	T	W	TH	F	S	Su	M	T	W	TH	F	S	Su	M	T	W	TH	F	S	Su
# of Hrs																																			
Activity # (s)																																			
Program Name:															Program Code:																				

*Categorical Program Funded Activities (1-24) :															*General Program Funded Activities (a-l): Check with Program Administrator for allowable program activities and list below.																
Check with Program Administrator for allowable program activities and list below.															Check with Program Administrator for activities (required by State & District policies) and list below																
1															13															a	
2															14															b	
3															15															c	
4															16															d	
5															17															e	
6															18															f	
7															19															g	
8															20															h	
9															21															i	
10															22															j	
11															23															k	
12															24															l	

**Certification:** I certify that the information recorded on this Daily Time Report is true and correct to the best of my knowledge.

Signature of Employee \_\_\_\_\_

Signature of Supervisor \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Program Name	Program Code	# of Hours	%
Title I	7S046		
Total			

# Contact Information

Local District Central  
Title I Coordinators

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Programs (FSEP) Specialists

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[FSEP Website](#)