SOUTHEASTERN LOUISIANA UNIVERSITY In-Kind/Cash Match Documentation PERSONNEL

(Volunteers, Advisory Boards, etc.)

Project Name: Project Budget Unit:		Employee: Empl ID:		
Date	Activity	Total Hours	Hourly Rate	Total Amount
	Total Haura			
	Total Hours			
	Fringe Benefits			
	i linge benents			
	Total Matching Contribution for (Month, Year)			
	(,			
	certify that the information above is correct to the beautiful Employee/Donor Signature	est of my kno	wledge. Date	
•	Approval: Budget Unit Head	-	Date	•

Please note the following regulations when documenting the value of donated services: (1)Volunteer Services - Unpaid services provided to a grantee by individuals will be valued at rates consistent with those paid for similar work in the grantees organization the grantee does not have employees performing similar work, the rates will be consistent with those ordinarily paid by other employers for similar work in the same labor market. In either case, a reasonable amount of fringe benefits may be included in the valuation.

(2)Employees of Other Organizations - When an employer, other than a grantee, furnishes free of charge, the services of an employee in the employee's normal line of work, the services will be valued at the the employee's regular rate of pay. Fringe benefits may or may not be allowable, depending on the funding agency. If the services are in a different line of work, then value the service in accordance with (1) above. If you have any questions regarding this form, contact Grants Accounting at 549-3534 or 549-5588.

-From *The Code of Federal Regulations*