

**AmeriCorps**  
**AmeriCorps State & National Improper Payments Assessment**  
**Documentation Requirements**

This guide provides details on the documentation required to support the different types of transactions for AmeriCorps' Payment Integrity Information Act (PIIA) formerly the Improper Payments Elimination and Recovery Improvement Act (IPERIA) assessment. Please follow the hyperlinks below to view lists of required documentation for each category of transaction.

If the item we have identified is a **single transaction**, please provide us the documentation described in this document. If the selected transaction is an **aggregate amount**, meaning the total contains more than one individual transaction, please provide a listing of the transactions that total to the amount identified. You do not need to complete this checklist for individual transactions until we have identified a **single transaction** to test.

If you have any questions about what documentation to submit, please email the IPERIA Helpdesk at [IPERIAHelpdesk@cns.gov](mailto:IPERIAHelpdesk@cns.gov).

**Personnel Compensation (Staff Payroll)** (including fringe benefits)

- **Criminal History Checks** (required)

**Living Allowance Payment to an AmeriCorps Member** (including health insurance, taxes, and fringe benefits)

- **Criminal History Checks** (required)

**Other Transaction Types** (meal and mileage stipends, payments to/for vendors, supplies, equipment, rent, utilities, travel reimbursements, administrative or indirect costs, etc.)

**Aggregate Amounts** (sub-grants, disbursements or reimbursements of grant funding to sub-recipients, lump sum entries that represent multiple payments or other or other payments which distribute program funding not included in the categories above)

## Personnel Compensation (Staff Payroll)

Personnel compensation payments are made to employees, including salary payments, FICA, and fringe benefits (e.g. health insurance and workers' compensation). AmeriCorps requires evidence to support the 1) employee's compensation amount and 2) completion of a Criminal History Check (CHC).

Please send all the following for the employee covered by the transaction:

1.  **A statement identifying the type of compensation (e.g. salary/wages, FICA, benefits, retirement)**
2.  **Documentation showing the selected employee's start date in a covered position**
3.  **Documentation related to criminal history checks (i.e. NSOPW, State, and FBI checks)**
  - Click [here](#) for CHC documentation guidance.
4.  **Documentation that shows the employee's position is included in the budget**
  - This is typically shown by providing the approved grant budget with the employee's position highlighted or indicated in some manner.
  - If the employee's title does not match the title in the budget, please clarify alignment to the budget.
5.  **Documentation showing both how much the personnel compensation was and how it was charged and allocated to AmeriCorps**
  - Documentation that verifies the hourly or annual salary amount that was in effect at the time of the selected transaction (e.g. an offer letter, pay increase notification, screenshot from HR system or employee profile).
  - The paystubs or payroll reports for the employee that cover the transaction period.
  - Documentation to support the employee's exempt or non-exempt status under the Fair Labor Standards Act (FLSA).
  - For fringe benefits such as health insurance, life insurance, and workers' compensation, please submit the policy from the provider that documents the workers' compensation rate or the organization's share of the health/life insurance premium.
  - For all types of personnel compensation, please explain how the amount charged to AmeriCorps was calculated and allocated to the grant.
6.  **A copy of the employee's timesheet for the period covered by the salary payment that is compliant with 2 CFR §200.430**
  - If the employee works for an organization (e.g. a university or local government) that is not required to keep timesheets in compliance with 2 CFR §200.430, please provide a statement indicating this, and we will confirm this requirement is not applicable. If not 100% on the grant, please provide documentation supporting the amount charged to the grant.
  - If the employee's compensation is allocated between the AmeriCorps grant and other activities, provide copies of time and attendance records or labor distribution reports which document how the allocation amounts are calculated.

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## Living Allowance Payment to an AmeriCorps Member

Living allowance payments, including payments for health insurance, taxes, and fringe benefits, to AmeriCorps members are the regular stipend payments in accordance with the schedule laid out in the member agreements. AmeriCorps requires documentation that the member was eligible to serve. For AmeriCorps members' eligibility requirements, please see 45 CFR § 2522.200.

**Please send all the following for the member covered by the transaction:**

- 1.  Documentation showing the date the member began service**
  - The signed member agreement satisfies this requirement.
  - Portal start date screenshot is also acceptable.
  
- 2.  Documentation showing proof of age**
  - Members must be at least 18 years of age when they begin service<sup>1</sup>.
  - Copies of a US passport, birth certificate, government issued ID, etc. can be used to show proof of age.
  
- 3.  Documentation that shows the member has a high school diploma or equivalent**
  - If the member agreement requires the individual to certify this requirement, the signed member agreement is acceptable documentation.
  - Screen shots from the portal, if this information is properly entered, are also acceptable.
  
- 4.  Documentation that shows the member is a citizen, national, or lawful permanent resident alien of the United States**
  - If citizenship was verified by the Social Security Administration (SSA) in the member portal, a screenshot of that verification is acceptable. If it was manually verified in the portal, please provide additional documentation.
  
- 5.  Documentation related to criminal history checks (i.e. NSOPW, State, and FBI checks)**
  - Click [here](#) for CHC documentation guidance.
  
- 6.  Documentation confirming the amount of the stipend paid to the member**
  - Please provide a signed member agreement with the stipend amount and frequency of payment. Please provide a payroll register or paystubs to support amount of stipend paid.
  - If the entire stipend amount is not charged to AmeriCorps please clarify how the AmeriCorps share is determined.
  
- 7.  Time and activity reports compliant with grant provisions and terms and conditions (timesheets) demonstrating the member was in service during the period covered by the transaction**

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<sup>1</sup> In some cases, members can be less than 18 years of age. If the member selected meets one of these special circumstances, please indicate this in your submitted documentation.

## Other Transaction Types

These are expenses for other program operating costs such as:

- Payments to contractors
- Rent or utilities
- Staff travel and meal reimbursements
- Recognition costs
- Supplies and equipment
- Member mileage and meal stipends
- Training costs
- Administrative or indirect costs

Documentation supporting the cost must demonstrate that it was appropriately authorized, and payment was based on an invoice or agreement.

**Please send the following to support the transaction:**

1.  **A description of how the payment conforms to the approved grant budget (required for all payments)**
  - This statement should indicate how the costs were reasonable and necessary for the operation of the program, please see 2 CFR §200.403.
  - This is typically shown by providing the approved grant budget, with the expense category highlighted.
2.  **Proof of cost or amount of payment (required for all payments)**
  - A contract or agreement showing a monthly cost can be used to satisfy this requirement.
  - A payment invoice or bill from the vendor is typically used to verify this amount.
3.  **Proof of Payment (required for all payments except indirect and administrative costs);**
  - Depending upon your accounting system, this can take many forms including, but not limited to a check stub, a bank statement, or receipt.
  - If the item was purchased with a credit card, please provide a credit card statement, with the charge highlighted and proof that shows the credit card was paid.
  - Please note, a general ledger entry is **NOT** acceptable proof of payment.
4.  **Basis of allocation, if applicable**
  - If the cost is charged to both the federal and non-federal shares of the grant, you must provide documentation that supports the allocation.
  - If the change is shared between multiple programs or grants, please provide the calculation that supports the program allocation percentage (e.g. 5 AmeriCorps employees / 20 organization employees = 25% program allocation for rent).
5.  **For mileage or travel payments, if applicable**
  - For these costs, mileage forms, travel vouchers, and/or travel authorizations satisfy these requirements. If the mileage rate varies from the rate in the budget, please explain.
  - For long distance travel costs, please provide documentation such as a travel authorization or prior approval to travel. If your policies and procedures do not require you to submit travel authorization, please let us know.
6.  **Indirect cost rates and administrative costs, if applicable**
  - If the line item selected is the indirect cost or administrative cost amount please provide the basis for the rate (agreement, budget, de minimis rate, etc.), the direct cost amount the rate was applied to and the calculation of the indirect/administrative costs available for the selected period of time. **Please do not submit documentation of proof of cost or payment. Only submit documentation showing how you apply the rate to your direct expenses to cover the payment selected.**

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## **Aggregate Amounts**

AmeriCorps recognizes that many of its grantees act as intermediaries which pass AmeriCorps funds on to other entities which directly carry out the grant-funded activities. Thus, the transaction selected may be a distribution of funding to another organization, rather than a specific payroll payment, payment to a service participant, or some form of vendor payment.

If the transaction selected for your grant was a payment to a sub-grantee, a disbursement or reimbursement of AmeriCorps federal grant funding to a sub-recipient, or was a lump sum of multiple individual payments listed as one line on your general ledger, please provide a listing of the individual transactions/expenditures that were included within the selected payment.

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## **Criminal History Check Documentation**

All individuals that serve in covered positions are required to comply with National Service Criminal History Check (NSCHC) law and regulations. This page serves as a quick checklist of all potentially applicable portions of a NSCHC<sup>2</sup>.

### **Documentation to support proof of criminal history checks:**

**1.  Background information contained within the attached "NSCHC Supplemental Checklist"**

- The individual's name as it appears on the government issued ID
- Confirmation as to whether the individual has recurring access to vulnerable populations. If the individual has exited, please indicate whether they had recurring access to vulnerable populations during service or employment
- The individual's start of service or employment date in a covered position
- Confirmation that the individual's state of service and state of residence are the same at the time of application. If they are different, please provide the location of the State of Residence
- Confirmation that the individual has not had a break in service of more than 120 days since their start date. If the individual has exited, please indicate if they had a break in service of 120 days or greater during their time of service or employment
- Confirmation that the individual's identity has been verified (See 45 CFR § 2540.204)
- If your organization completed the NSCHC for the individual using the AmeriCorps vendor Truescreen, please indicate your case number, if available.
- If your organization completed the NSCHC for the individual using the AmeriCorps channeler Fieldprint, please indicate your transaction case number (TCN), if available.

NOTE: The NSCHC Supplemental Checklist must be completed by someone other than the individual for whom the form is being completed.

**2.  National Public Sex Offender Website (NSOPW) search (required for all individuals)**

**3.  State of Service (SOS) check, if applicable**

**4.  State of Residence (SOR) check, if applicable**

**5.  FBI check, if applicable**

**6.  If your program used an Alternative Search Procedure (ASP), please provide the approved ASP.**

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<sup>2</sup> For more information on NSCHC, please visit CNCS's [Criminal History Check Knowledge Network](#) page. The NSCHC Steps Checklist is found [here](#). If your organization is unable to share criminal history results due to state law, we encourage you to utilize [this Documentation Checklist](#).

## **Criminal History Check Documentation**

### **National Service Criminal History Check Effective Dates [Revised on January 2, 2014]**

The NSCHC is a screening procedure established by law to protect the beneficiaries of national service. The requirements have evolved since they were first established in 2007. The level of checks required for national service participants and staff member depends not only on the nature of their roles but also their start dates.

- I. If the start date falls before 09/30/2009, then do the following:
  - A. The NSCHC applied only to individuals (e.g. grant staff and volunteers/members) in an AmeriCorps State and National program, Foster Grandparent Program, Senior Companion Program and other AmeriCorps funded program with recurring access to vulnerable populations (excluding Learn and Serve and RSVP).
  - B. Component 1: Programs had to complete the NSOPW check component on their currently serving covered positions within 90 days from the publication date of the rule (08/24/2007). New hires on 11/23/2007 and after must be cleared through this check before starting service/work. [See I.F.1]
  - C. Component 2: For individuals serving in a covered position with recurring access to vulnerable populations, EITHER the State check component (state of residence AND state of service) OR the FBI check component must be initiated no later than the start of work/service. Pre-11/23/2007 positions with recurring access to vulnerable populations were grandfathered in to not have to conduct component 2 (state or FBI). [See I.F.2]
  - D. Accompaniment was required while results for Component 2 were pending.
  - E. Baseline disqualifying offense: Sex offenses that require an individual to be registered on a sex-offender registry.
  - F. JANUARY 1, 2013 reach back and update for currently serving covered positions that started during this time frame:
    1. Effective 01/01/2013 positions NOT covered under the 2007 regulations (those with no access or episodic access to vulnerable populations) were also required to have a nationwide NSOPW check.
    2. Effective 01/01/2013 those grandfathered in prior to 11/23/2007 for component 2 and currently serving must self-certify that they do not have a murder conviction. Grantees must keep that certification in the individual's file. This is not needed if the individual cleared a state or FBI check. Programs should check results of those who did undergo a state or FBI check during this period to ensure there were no murder convictions that were cleared for individuals still serving as of 01/01/2013.

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- II. If the start date falls between 10/01/2009-04/20/2011, then do the following:
  - A. On 10/01/2009, the covered positions to which the NSCHC applied expanded to all national service participants receiving a living allowance, stipend, and/or education award, as well as staff (including new RSVP staff), regardless of contact with a vulnerable population.
  - B. Component 1: Programs must complete the NSOPW check before the start of work/service.
  - C. Component 2: For all individuals in a covered position, EITHER the State (state of residence AND state of service) OR the FBI check must be initiated no later than the start of work/service.
  - D. For those with recurring access to vulnerable populations, accompaniment was required while results for Component 2 were pending.
  - E. RSVP staff that started before the pre-2009 effective date were grandfathered in and did not have to conduct anything during this timeframe. [See II.G.]
  - F. Murder was added as a disqualifying baseline offense. The disqualification includes individuals who are applicants for covered positions, as well as individuals who are currently serving with the organization in a covered position. Ensure all results cleared individuals against sex offenses and murder.
  - G. JANUARY 1, 2013 reach back and update for currently serving covered positions that started during this time frame:
    - 1. Effective 01/01/2013 those grandfathered in prior to 10/01/2009 for component 2 and currently serving must self-certify that they do not have a murder conviction (e.g. RSVP staff who started before 10/01/2009). Grantees must keep that certification in the individual's file. This is not needed if the individual cleared a state or FBI check since 10/01/2009.
    - 2. Effective 01/01/2013 RSVP staff that started before 10/01/2009 were also required to conduct a nationwide NSOPW.

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- III. If the start date falls between 04/21/2011-12/31/2012 (Gap Period), then do the following:
  - A. Component 1: Programs must complete the NSOPW check before the start of work/service.
  - B. Component 2: For all individuals in a covered position who started on or after 04/21/2011 and completed service by 12/31/2012, EITHER the State (state of residence and state of service) OR the FBI check must be initiated no later than the start of work/service.



C. For those with recurring access to vulnerable populations, accompaniment was required while results for Component 2 were pending.

D. The number of days used to calculate a break in service was extended, retroactive to 04/21/2011 from 30 to 120 days.

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IV. If the start date falls on or after 04/21/2011-Present, then do the following:

A. Determine whether the position has recurring access to vulnerable populations or not.

B. If access is not recurring or episodic, then for all individuals who started on or after 4/21/2011:

1. Component 1: Programs must complete the NSOPW check before the start of work/service.
2. Component 2: For all individuals in a covered position, EITHER the state (state of residence AND state of service) OR the FBI check must be initiated no later than the start of work/service.

C. If access is recurring, then for all individuals who started on or after 04/21/2011 and continued their service past 12/31/2012:

1. Component 1: Programs must complete the NSOPW check before the start of work/service.
2. Component 2: The State (state of residence AND state of service) check must be initiated no later than the start of work/service.
3. Component 3: The fingerprint-based FBI check must be initiated no later than the start of work/service.
4. Accompaniment is required while results for component 2 or 3 were pending. Accompaniment can cease if either Component 2 or 3 cleared.
5. If an individual falls into the gap period for their first term of service and returns for a consecutive term of service within 120 days, he or she would need to supplement the already-completed components with any missing component required to have recurring access to vulnerable populations, even if he or she did not have it for the first term due to the gap period.
6. If an individual has a change in position on or after 01/01/2013 and will be having recurring access to vulnerable populations in their new position, then he/she's criminal history check must be supplemented with any missing checks (e.g. the FBI check). This applies even with a break in service less than 120 days.