

**COMPANY HANDBOOK**

**VERSION 1**

**AUGUST 1, 2001**

**ANSWERS TO MOST  
OF YOUR  
QUESTIONS**

## INTRODUCTION

Welcome to Ben Franklin Technology Partners of Central and Northern Pennsylvania (BFTP/CNP)! All of us at the Center are excited about working with you in the coming months as your project progresses. We are available to assist you and answer any questions you may have.

This handbook is designed to answer the questions most frequently asked by entrepreneurs new to our program. It is truly a “first edition” and will be a work in progress for the next year or so. For now, it will help you anticipate report requirements, introduce you to the Transformation Business Services Network, and spell out some of the guidelines by which we operate.

If there is a topic or issue that you feel needs to be addressed in this handbook, please let me know. I’ll put it in the file to be included in the second edition.

If you need to talk with me about anything, I’m always just a phone call or e-mail away. Don’t ever hesitate to call or write.

I look forward to working with you, and wish you the very best with your project.

Kathleen D. Matason  
Director of Operations  
[Kdm1@psu.edu](mailto:Kdm1@psu.edu)  
814-863-4884 voice  
814-863-0960 fax

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## **PAYMENTS BY BEN FRANKLIN TECHNOLOGY CENTER**

### How will my funds be distributed?

Your Ben Franklin funding will be paid in installments and subject to certain conditions. Ten percent (10%) of the awarded amount will be withheld to the end of the contract period and paid after submission of a comprehensive final report. Your field advisor will ascertain completion of the project and will approve the final report prior to the release of the final increment of funding.

### When can I expect the first check?

When a copy of the fully executed contract is mailed to you, a check for one-third of 90% of your awarded amount will be included.

### When can I expect the next check?

Your contract includes a schedule for quarterly reports. Quarterly reports are due in October, January, and April. The October report covers the first quarter; the January report covers the second quarter; and the April report covers the third quarter. When you submit your first quarterly report in October, Ben Franklin's Director of Operations will review it for compliance to our guidelines. If everything is in order, and 80% of the first increment has been spent, the second installment (1/3 of 90% of the awarded amount) will be released.

### What happens if I have not expended 80% of the first increment?

You may submit a revised quarterly report at the point at which you reach expenditures of 80% of your first increment. You need not resubmit documentation already included in the first quarterly report. Simply update the summary sheet (Format I) to include expenses from the start of the contract to the appropriate date, and include back-up only for those expenses that occurred after the date of your initial quarterly report. Upon approval of the Director of Operations, the second increment will be released.

### When can I expect the third installment?

In similar fashion to the second increment, the third will be released upon completion of the mid-year report, which is due in January. You need to have expended 80% of the first two increments combined. In addition, you need to be on track with your matching funds. Should you not be at the 80% expenditure point, follow the same procedure outlined in the paragraph above.

### What happens in April?

You are expected to provide a quarterly report in April. Under the typical twelve-month award beginning July 1 and ending June 30, there will be no funding increment associated with this report. However, this report provides the opportunity for us to assess the likelihood of you meeting remaining milestones, finishing the project, and expending allocated funds. Should you need assistance in any of these areas, or others, we have sufficient time to intercede and ensure a positive outcome to your project.

### What happens if my award starts on or about October 1?

A payment will be associated with April. You would have received 1/3 of 90% of your awarded amount with your contract. In January, your first report would have been due, and the second increment paid (subject to the same conditions outlined above). Thus, in April you would be submitting your second quarterly report, and would receive the third increment of 1/3 of your awarded amount.

### What happens if my award starts on or about January 1?

Ten percent (10%) of your awarded amount will be withheld and paid at the end of the project, subject to the conditions outlined above. A check for one-half of 90% of your awarded amount will be included with your fully executed contract. In April, after your first quarterly report is approved, you will receive the second increment of one-half of 90% of your awarded amount, subject to the 80% expenditure rule.

### What happens if my award starts on or about April 1?

You will receive 90% of your awarded amount with your fully executed contract. The final 10% will be released after you complete a final report, subject to approval by your field advisor and Director of Operations.

### What happens if my end date is prior to June 30?

Occasionally, an award is made for a six-month period from July 1 through December 31. In this case, you would receive one-half of 90% of your awarded amount with the copy of the fully executed contract and one-half of 90% of your awarded amount in October, subject to submitting an interim report and expending 80% of the first increment. The final payment would occur in January, after you had submitted a comprehensive final report that was approved by your field advisor and the Director of Operations.

What happens if I finish my project prior to my contract end date?

After consultation with, and approval by, your field advisor, you may submit a comprehensive final report. You may request the guidelines from our Director of Operations. When the report and financial information are approved, your final check will be issued.

What happens if I don't expend the entire amount allocated to me?

You are not required to spend all of the funds. If you find that you have been able to complete the project at a lesser cost, that amount will be subject to payback conditions. You will not be responsible for payback associated with the contract amount, but the amount actually expended on the project.

What happens if I need more funding?

You should discuss your situation with your field advisor. If he decides that additional funding would enhance the progress of your project, he may suggest proposing an addendum to your contract to the Ben Franklin/CNP Board of Directors. This is contingent upon there being funds available for distribution in the current fiscal year.

See Submission of Follow-on Proposals for a discussion on funding for subsequent years.  
NOTE: This section had not been prepared by 8/1/01; will be available at a later date.

I have a question not addressed here

Contact Kathleen D. Matason, Director of Operations, 814-863-4884,  
[kdmatson@cnp.benfranklin.org](mailto:kdmatson@cnp.benfranklin.org)

## REQUIRED COMPANY REPORTS

You are required by our guidelines and your contract to submit quarterly reports and a comprehensive final report. Reports typically are linked to the release of your incremental payments of the funding you have been awarded (see Payments by Ben Franklin).

### When are reports due?

Reports are due on the second Monday of October, January, April, and July.

### Will I get a reminder notice?

About three weeks prior to the reporting date, you will receive a packet in the mail that contains all pertinent information (see Appendix I). There are formats designed for reporting on Ben Franklin expenses and matching expenditures. You are required to send copies of invoices and other back-up for Ben Franklin expenses. You will be asked to prepare a short narrative of progress to date and copies of any publicity or promotional items that were published in the last quarter.

### Why do I need to send copies of invoices and other back-up for Ben Franklin expenses?

Ben Franklin Technology Centers act as stewards of public funds and, as such, are accountable by both legislation and guidelines to ensure proper use of those funds. Ben Franklin/CNP utilizes the accounting systems of The Pennsylvania State University and adheres to all policies and procedures that have been put in place to ensure proper expenditure of state, Federal, and industrial funds. Appropriate back-up materials are required by both the Penn State auditors and the independent auditors that Ben Franklin Centers are required by guidelines to hire.

In light of these requirements, it is prudent for our Director of Operations to verify and approve expenditures against Ben Franklin funds. This ensures that our files will be complete and ensures that you will not be surprised after your award has expired by disallowable expenses. Should claimed expenditures be judged disallowable at that point, you would have to pay back the disallowed amounts immediately. If our Director of Operations tracks your expenditures on a quarterly basis, you can be sure that your expenditures are allowable.

### What is considered allowable?

Your best guideline to allowable costs is your fully-executed contract. A copy of your approved budget is included in your fully-executed contract. Be sure to use this budget, and not the budget in your proposal, because changes could have occurred during the approval process. Generally speaking, anything that relates directly to the project is allowable.

Can I make changes in the budget after the funding starts?

The budget you begin with is designed to be a guide for you and a means by which your field advisor and our staff can assess the likelihood of you achieving success in your project. As such, it can be considered a living document, subject to changes and tweaks as the project progresses. However, you must discuss changes in your budget with your field advisor or the Director of Operations. Not only does this ensure that the change is appropriate and that it enhances the progress of the project, it allows the change to be documented in your file so that there is justification for the charge when it appears on your quarterly or final report.

Give me some examples of charges that are not allowable.

Overhead	Rent*	Utilities*
Alcoholic Beverages	Cleaning Supplies	Janitorial Services
Movies	Coffee Supplies	High-cost travel
Furniture	Licensing Fees**	
Patent costs over \$10K	Equipment in last 30 days of project	

\*Does not apply to incubators

\*\*Licensing fees can be used for match, not direct Ben Franklin expenditures

What about equipment purchases?

In order for the full cost of equipment to be covered, it must be project-specific and not suitable for any other use.

More typically, Ben Franklin funds partial equipment purchases by using a simple depreciation method. We determine the useful life of a piece of equipment, typically three years or 36 months. The cost of the equipment is divided by 36, and the result of this calculation is the amount that a Company may charge to Ben Franklin funds for each month of the award.

All equipment purchases are to be listed in the proposal and specified in the contract. Purchases determined to be necessary for the execution of the proposed work mid-year are subject to written approval by your field advisor, with a copy to the Director of Operations. Use of e-mail for this notification is sufficient.

By state guidelines, purchase of equipment in the last 30 days of a contract is prohibited.

## **SERVICES OF THE BEN FRANKLIN TRANSFORMATION BUSINESS SERVICES NETWORK**

Ben Franklin/CNP funds the Ben Franklin Transformation Business Services Network (TBSN) to directly support the activities of start-up companies. Personnel in the TBSN are available to work on specific problems of emerging companies.

TBSN provides tools to train business owners and their employees in a number of human resource and financial management areas. Each tool from the TBSN is a specific intervention and reflects approximately ten hours of engagement by the TBSN staff.

### Human Resource Tools

Competitive advantage may be achieved by firms that appropriately manage their employees. The issues addressed in these tools will assist the efficient and effective management of this resource to achieve strategic organizational objectives.

#### Employee Relations

This activity will assist the organization in identifying personnel needs and providing the ongoing support to establish and maintain a stable and productive workforce.

#### Office Organization

The answers to better office management lie in the analysis of existing procedures and the introduction of improved processes or equipment to address current and future needs. This activity provides insights for improving office performance.

#### Employment Interviews

Recruitment and selection are at the heart of many organizational and management challenges. Understanding the available options and methods will help to find the right person for the job.

#### Manage and Motivate Employees

A leader must have someone to lead. Satisfied employees will result in a stable environment from which to grow a business.

#### Computer Training

Information technology and computer systems represent valuable tools in the successful management of a business. Proper training in the use of these systems will benefit the company in utilizing these resources to the best advantage.

### Strategies for Organizational Change

A growing business and increasing volume generate additional duties and responsibilities. Managing the changes provides for an improved allocation of energy and delegation of work to better benefit the business.

### Employee Record Keeping

As the business grows and the number of employees increases, the need for a formal tracking system becomes apparent. This tool helps to address employee records issues to satisfy legal, ethical and good business issues.

### Supervisory Responsibilities

Clear personnel policies and expectations should be established as early as possible. These become useful guides in all areas including recruitment and selection, compensation and benefits, training and promotions.

### Effective Skills Training

Peak performance in the work place begins with effective on-the-job training (OJT). This activity offers practical tools that help participants develop and deliver effective OJT.

### Supervisory Skills for Administrative Assistants and Secretaries

This activity provides supervisors in administrative positions with the skills necessary to manage their work and supervise staff. It helps to develop practical guidelines for managing communication and fostering staff development.

### Financial Tools

Businesses owners need to communicate their results. These tools will enable a business owner to provide necessary financial information to the outside world, including investors and tax authorities. Within the company, the training provides the means to control, evaluate and plan the business.

### Install Computerized Accounting System

This activity provides valuable assistance in the selection, installation and basic operation of a computerized system for recording the financial transactions of a business.

### Conversion to New Accounting System

New and rapidly growing businesses encounter increasing and changing demands for financial record keeping and reporting. This tool provides assistance in upgrading or converting to a new system that will satisfy expanded and anticipated future requirements.

### Train on Client's Accounting Software

TBSN can provide specific accounting system support to provide a company's employees the needed skills for recording and reporting financial information consistent with the need of the business.

### Implement Payroll on Computerized Accounting System

Timely and accurate payroll information is critical not only to satisfy financial record keeping and tax reporting requirements, but also to complement the personnel function.

### Cost Accounting

This tool provides the necessary direction to properly assign costs for financial reporting, operations planning and marketing decision making.

### Establish Inventory System

Timely and accurate records for raw materials, work-in-process and finished goods are necessary for meeting customer deliveries while managing cash flow. This tool provides the foundation for controlling one of the most cash-consuming items appearing on many balance sheets.

### Develop Pro-Forma Statements

This tool provides the basis for demonstrating the past, current and projected financial performance of the business. The three basic financial statements created represent standard input to business plans and are highly scrutinized by potential lenders and investors.

### Create What-If Scenarios

After pro-forma financial statements have been developed, alternative business strategies can be analyzed. These strategies include sales volumes, pricing, labor costs, capital expenditure plans and others. The use of this tool demonstrates the financial outcomes of various client plans and assumptions.

### Budget Preparation

Based upon the company's projected plans for revenues and expenditures, the budgeting tool develops the resulting financial statements for that fixed period. The budget becomes the baseline against which to compare actual performance, take corrective actions when necessary and develop longer-term strategies.

### Management Information Packages

Monthly financial reports provide management with the opportunity to monitor performance, identify problem areas and make adjustments in a timely fashion.

### Year-end Processing

This tool provides assistance in closing the books for the year and developing the necessary information for tax return preparation.

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# **IMPACT SURVEY**

**Ben Franklin Technology Partners**  
**Impact Survey**  
**12/31/00-12/31/01**

**Instructions:** Please answer the questions in each section and then mail or fax the completed survey to [CENTER]. Your responses will be kept strictly confidential – they will only be used in aggregate to develop a better understanding of the outcomes of companies’ interactions with the Ben Franklin Technology Partners (BFTP) and the impacts of the services and funding it provides. If you have any questions, please call [CONTACT PERSON] at [CONTACT PHONE] or by e-mail at [ADDRESS].

**Please check the information below and make any necessary additions or corrections.**

**Company Name:** [PREPRINTED]

**Telephone:** [PREPRINTED]

**Address:** [PREPRINTED]

**Fax:** [PREPRINTED]

**City, State, Zip:** [PREPRINTED]

**Date Founded:** [PREPRINTED]

**Contact:** [PREPRINTED]

**Email:** [PREPRINTED]

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**SECTION I – HISTORY OF BEN FRANKLIN FUNDING**

Projects with BFTP to date [PREPRINTED]:

Other BFTP Services provided within the last 5 years:

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When the survey is completed, have a company official sign below:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name and Title

**When finished, please fax or mail the completed survey, including this page, to:**  
**[CONTACT PERSON] at Ben Franklin Technology Partners**  
**[ADDRESS]**  
**FAX:**

## SECTION II -- IMPACT ON PERFORMANCE

Please provide sales data for your company:	Reported for Prior Reporting Year ending 12/31/00	Current Reporting Year ending 12/31/01
<b>TOTAL SALES:</b>	\$ [PREPRINTED]	\$

## SECTION III -- IMPACT ON EMPLOYMENT

Please provide the requested employment data for personnel located in Pennsylvania only.

**Definitions:** For the purpose of this impact survey, the following terms are defined as:

**Current Reporting Year:** The 12-month calendar year ending on December 31, 2001.

**Prior Reporting Year:** The 12-month calendar year ending on December 31, 2000.

**New employees:** Jobs added during the current reporting year as a result of BFTP interaction.

**Retained employees:** Jobs existing prior to BFTP interaction and which are still in existence as a result of BFTP interaction.

TOTAL EMPLOYMENT	Reported for Prior Reporting Year ending 12/31/00	Current Reporting Year ending 12/31/01
Total Annual Gross Payroll	\$ [PREPRINTED]	\$
Total Number of Employees as of Dec. 31st	# [PREPRINTED]	#

BREAKDOWN OF JOBS CREATED	Reported Prior to 12/31/00	Current Reporting Year ending 12/31/01
Number of New Employees hired as a result of BFTP interaction, by salary range:		
Under \$30,000 annual salary	# Not Available	# _____
\$30,000 - \$50,000 annual salary	# Not Available	# _____
Over \$50,000 annual salary	# Not Available	# _____
<b>Totals:</b>	# [PREPRINTED]	# _____

BREAKDOWN OF JOBS RETAINED	Reported Prior to 12/31/00	Current Reporting Year ending 12/31/01
Number of Existing Employees retained as a result of BFTP interaction, by salary range:		
Under \$30,000 annual salary	# Not available	# _____
\$30,000 - \$50,000 annual salary	# Not available	# _____
Over \$50,000 annual salary	# Not available	# _____
<b>Totals:</b>	# [PREPRINTED]	# _____

**NOTE: An employee reported as a new job created in a prior year's report cannot be counted again as a retained job in future years' reports.**

**SECTION IV -- IMPACT ON INNOVATION**

**Definitions:** For the purpose of this impact survey, the following terms are defined as:

**Product Commercialized:** A product that was developed, introduced to a commercial market and sold for the first time as a result of BFTP interaction.

**Process Implemented:** A process that was developed and implemented in-house, as a result of BFTP interaction, that is an improvement in the way a previously existing product or service was produced.

<b>PRODUCTS COMMERCIALIZED</b>	<b>Reported prior to 12/31/00</b>	<b>Current Reporting Year ending 12/31/01</b>
<b>Product Name:</b> <b>Description:</b>	[PREPRINTED] _____ _____ _____	_____ _____ _____
<b>Date Commercialized:</b>	____/____/____	____/____/____
<b>Product Name:</b> <b>Description:</b>	[PREPRINTED] _____ _____ _____	_____ _____ _____
<b>Date Commercialized:</b>	____/____/____	____/____/____
<b>Product Name:</b> <b>Description:</b>	[PREPRINTED] _____ _____ _____	_____ _____ _____
<b>Date Commercialized:</b>	____/____/____	____/____/____

<b>PROCESSES IMPLEMENTED</b>	<b>Reported prior to 12/31/00</b>	<b>Current Reporting Year ending 12/31/01</b>
<b>Process Description:</b>	[PREPRINTED] _____ _____ _____	_____ _____ _____
<b>Date Implemented:</b>	____/____/____	____/____/____
<b>Process Description:</b>	[PREPRINTED] _____ _____ _____	_____ _____ _____
<b>Date Implemented:</b>	____/____/____	____/____/____
<b>Process Description:</b>	[PREPRINTED] _____ _____ _____	_____ _____ _____
<b>Date Implemented:</b>	____/____/____	____/____/____

**SECTION V -- IMPACT ON FINANCING**

Please indicate below the funding your company has received in this reporting year from each source. The prior reporting year's funding is listed for your reference.

<b>Funding Source:</b>	<b>Reported for Prior Reporting Year ending 12/31/00</b>	<b>Current Reporting Year ending 12/31/01</b>
Commercial lenders	\$ [PREPRINTED]	\$
Private investors	\$ [PREPRINTED]	\$
Institutionally managed venture capital	\$ [PREPRINTED]	\$
Public offering	\$ [PREPRINTED]	\$
Strategic partners (other companies, etc.)	\$ [PREPRINTED]	\$
Federal grants / contracts	\$ [PREPRINTED]	\$
Other Commonwealth of PA programs	\$ [PREPRINTED]	\$
Other (Please specify)	\$ [PREPRINTED]	\$

**SECTION VI – GENERAL INFORMATION AND CLIENT FEEDBACK**

*[Center-specific question #1]*

*[Center-specific question #2]*

*[Center-specific question #3]*

**Comments:**

Please provide specific comments or suggestions regarding any aspect of your interaction with the BFTP, including any changes that the BFTP might make to better meet your needs in the future.

# **APPENDIX**

## **Samples of required reports**

# **FINANCIAL INFORMATION**

**Identical for all reports**

# FINANCIAL VERIFICATION

## **DIRECTIONS: PLEASE READ THESE INSTRUCTIONS CAREFULLY.**

Please use the attached formats for Verification of Expenditure(s) on your project. These must be received with your report. Documentation for each expenditure must be included with your report (examples would be: copies of invoices for supplies ordered with check numbers, time and effort reports, travel receipts, calculation of fringe benefits). Format II should be used to report matching funds expenditures on the project.

### **Documentation is required only for the expenditures incurred on the Ben Franklin Funds.**

***NOTE: Mark invoices in the upper right corner the category to which the expenditure is charged: Supplies, travel, communication.....  
If multiple invoices are on one sheet, please mark the corner of each invoice.***

Your next payment, if applicable, will be mailed when your report and the Ben Franklin Funds and Matching Funds verifications are received and reviewed **AND** expenditures on the Ben Franklin Funds total at least 80 percent of the funds paid to date. We cannot accept Financial Verifications without detailed information.

1. FORMAT I - Report of your Ben Franklin Award Expenditures
2. FORMAT II - Report of the matching funds on your project.

A separate sheet should be used for each of the following categories that are supporting your project.

- a) Your in-kind
- b) Other companies participating in the project
- c) Each college/university
- d) Each Nonprofit Agency and Foundation
- e) Each federal award
- f) Other (including vocational-technical schools and government agencies)

#### PLEASE NOTE:

The name of person, title, percent of effort, and dollar amount for salaries paid on BF and Matching Funds (including In-Kind Support) must be listed separately.

EXAMPLE: J. Black, Technical Assistant, 10 percent, \$2,500

This is in accordance with your Project Agreement with the Center.

## **BEN FRANKLIN CHALLENGE GRANT**

### **TIPS FOR FINANCIAL REPORTING**

#### **REFER TO YOUR COMPANY HANDBOOK FOR ADDITIONAL DETAILS**

#### **ALLOWABLE COSTS**

Those items specified in your budget.

Budget change items discussed with and approved by your field advisor.

Only costs directly related to the project.

#### **NON-ALLOWABLE COSTS**

Rent, utilities, insurance (with the exception of payroll taxes). This does not apply to incubators.

Total cost of equipment (unless specifically budgeted in contract).

Expenses not directly related to the project, i.e., cleaning supplies, toilet paper, trash bags, coffee supplies, etc.

#### **HANDLING EQUIPMENT COSTS**

You may use a simple depreciated amount for equipment purchased for the project that has not been specifically budgeted in your contract. For example, you may need to purchase a printer. Let's say the printer cost \$1200 and has a useful life of three years (36 months). Divide \$1200 by 36, for a monthly cost of \$33. You may use \$33 per month as an expense for each month of your contract, beginning with the month of purchase.

#### **COPIES OF INVOICES**

Please include copies of all invoices or other proofs of cost. This applies only to the Ben Franklin expenses, not matching expenses. An easy way to do this is to put a copy of the invoice in a special file folder marked "Ben Franklin Reports" when the invoice is paid. You will have all invoices in one place, ready to send, when you complete your interim and final reports. It's easier for all of us for you to send invoices, since the alternative could be Deloitte and Touch auditors paying you a visit in early Fall, looking for those invoices.

#### **QUESTIONS??**

Call or e-mail Kathy Matason, 814-863-4884, [kdmatson@cnp.benfranklin.org](mailto:kdmatson@cnp.benfranklin.org)

# **FIRST INTERIM REPORT**

**BEN FRANKLIN PROJECT DIRECTORS 2001/2002**  
**INTERIM REPORT DUE - October 15, 2001**

Attached is the format to be used for the report due on your project.

Progress Narrative

One page, double spaced.

Progress: *Project Start Date to September 30, 2001*

Financial

Formats attached.

Copies

Ten copies of the one-page report narrative.  
One copy of the financial information per instruction sheet.

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NOTE:

1. Ben Franklin Funds and the matching funds on your project must be expended by June 30, 2002.
  2. All items (materials, supplies, ...) ordered must be received prior to June 30.
  3. Other expenditures (telephone, postage, salaries, wages ...) must be project specific and be incurred by June 30.
- 

Please call if you have questions.

Kathleen D. Matason  
Director, Operations

**BEN FRANKLIN CHALLENGE GRANT  
REPORT**

**As of September 30, 2001**

PROJECT TITLE: \_\_\_\_\_

\_\_\_\_\_

PROJECT DIRECTOR: \_\_\_\_\_

PROJECT NUMBER: \_\_\_\_\_

PROGRESS NARRATIVE (double spaced)

**FORMAT I**

**ON COMPANY/AGENCY LETTERHEAD**

*Project Start Date – September 30, 2001*

**BEN FRANKLIN EXPENDITURES**

**Project No. \_\_\_\_\_**

<u>Category</u>	<u>Total</u>
Salaries (list titles)	_____
Fringe Benefits	_____
Supplies	_____
Travel	_____
Consulting (list titles)	_____
Telephone	_____
Printing	_____
Other (list)	_____
_____	_____
Total	_____

"I hereby certify that all expenditures are for appropriate purposes and in accordance with the Agreement set forth in the Application and award document."

Signature

Please type name and title of authorized company official

Date of signature

## FORMAT II

### ON COMPANY/AGENCY LETTERHEAD

*Project Start Date – September 30, 2001*

### MATCHING FUNDS

**Project No.** \_\_\_\_\_

(Use Separate Form for Each Co-Sponsor)

<u>Category</u>	<u>Total</u>
Salaries (list titles)	_____
Fringe Benefits	_____
Supplies	_____
Travel	_____
Consulting (list titles)	_____
Telephone	_____
Printing	_____
Other (list)	_____
_____	_____
Total	_____

"I hereby certify that all expenditures are for appropriate purposes and in accordance with the Agreement set forth in the Application and award document."

Signature

Please type name and title of authorized  
company official

Date of signature

# **MID-YEAR REPORT**

**THE BEN FRANKLIN PARTNERSHIP PROGRAM**  
**MID-YEAR REPORT**  
**RESEARCH AND DEVELOPMENT**

- SUBMIT:**
- a) Ten copies to the Ben Franklin Center  
115 Technology Center  
University Park, PA 16802
  - b) One copy to each project co-sponsor

**DUE:           **January 8, 2001****

**CONTENTS:**

*Please Double Space*

- a)    **COVER SHEET:**                    Mid-Year Report  
  Project Start Date – December 31, 2000  
  Project Title  
  Project Number

- b)    **SUMMARY SHEET**

**Results of Project:** Please summarize the results of your project in no more than two paragraphs. These paragraphs should include quantitative information on the project.

- c)    **PROGRESS NARRATIVE:**

**Progress:**            Explain how the project proceeded in relation to planned activities in your proposal. Include any changes in activities, scope, or direction.

**Interaction with Co-sponsoring Organization(s):** (if applicable) technological advances transferred to industry.

**Patents:**            A general description of any invention or process being reported as an application for or award of a U.S. Patent.

**Economic Impact:** A description of how your project has contributed (or will contribute) to the creation or retention of jobs. Include accomplishments toward or potentiality of commercialization of your research.

**ATTACHMENTS - Submit only one copy:**

**Publicity:** Printed reports, publications, brochures, press releases, news articles, videos, or photographs resulting from the project.

**Financial:** Verification of Ben Franklin and matching funds (cash, equipment, inkind). Formats provided.

**MID-YEAR REPORT**

**For Ben Franklin Projects Funded: July 1, 2000 – December 31, 2000**

**DUE: January 8, 2001**

To: Project Directors

Attached is the format for your MID-YEAR Report.

We have included suggested formats for you to use for Financial Verification. These should be included with your report to the Center.

**BF REMINDERS:**

All funds -- Ben Franklin and Matching Funds expenditures must occur between Project start date and June 30, 2001. This report will cover expenditures up to December 31, 2000.

If you have any questions, please call (863-4884).

Kathleen D. Matason  
Director, Operations

**BEN FRANKLIN CHALLENGE GRANT  
REPORT**

**As of December 31, 2000**

PROJECT TITLE: \_\_\_\_\_

\_\_\_\_\_

PROJECT DIRECTOR: \_\_\_\_\_

PROJECT NUMBER: \_\_\_\_\_

PROGRESS NARRATIVE (double spaced)

**FORMAT I**

**ON COMPANY/AGENCY LETTERHEAD**

*Project Start Date – December 31, 2001*

**BEN FRANKLIN FUNDS EXPENDITURES**

**Project No.** \_\_\_\_\_

(Use Separate Form for Each Co-Sponsor)

<u>Category</u>	<u>Project Start September 30, 2000</u>	<u>October 1, 2000 December 31, 2000</u>	<u>Total</u>
Salaries (list titles)	_____	_____	_____
Fringe Benefits	_____	_____	_____
Supplies	_____	_____	_____
Travel	_____	_____	_____
Consulting (list titles)	_____	_____	_____
Telephone	_____	_____	_____
Printing	_____	_____	_____
Other (list)	_____	_____	_____
Total	_____	_____	_____

I hereby certify that all expenditures are for appropriate purposes and in accordance with the Agreement set forth in the Application and award document."

Signature

(Please type name and title of authorized company official)

Date of signature

**FORMAT II**

**ON COMPANY/AGENCY LETTERHEAD**

*Project Start Date – December 31, 2000*

**MATCHING FUNDS EXPENDITURES**

**Project No.** \_\_\_\_\_

(Use Separate Form for Each Co-Sponsor)

<u>Category</u>	<u>Project Start September 30, 2000</u>	<u>October 1, 2000 December 31, 2000</u>	<u>Total</u>
Salaries (list titles)	_____	_____	_____
Fringe Benefits	_____	_____	_____
Supplies	_____	_____	_____
Travel	_____	_____	_____
Consulting (list titles)	_____	_____	_____
Telephone	_____	_____	_____
Printing	_____	_____	_____
Other (list)	_____	_____	_____
Total	_____	_____	_____

I hereby certify that all expenditures are for appropriate purposes and in accordance with the Agreement set forth in the Application and award document."

Signature

(Please type name and title of authorized company official)

Date of signature

# **THIRD INTERIM REPORT**

**BEN FRANKLIN PROJECT DIRECTORS 2000/2001**  
**INTERIM REPORT DUE - April 9, 2001**

Attached is the format to be used for the report due on your project.

Progress Narrative

One page, double spaced.

Progress: *Project Start Date to March 31, 2001*

Financial

Formats attached.

Copies

One copy of the financial information per instruction sheet.  
Ten copies of the progress narrative per instruction sheet.

---

NOTE:

1. Ben Franklin Funds and the matching funds on your project must be expended by June 30, 2001.
  2. All items (materials, supplies, ...) ordered **must be received** prior to June 30.
  3. Other expenditures (telephone, postage, salaries, wages ...) must be **project specific and be incurred** by June 30.
- 

Kathleen D. Matason  
Director of Operations

**BEN FRANKLIN CHALLENGE GRANT  
REPORT**

**As of March 31, 2001**

PROJECT TITLE: \_\_\_\_\_

\_\_\_\_\_

PROJECT DIRECTOR: \_\_\_\_\_

PROJECT NUMBER: \_\_\_\_\_

PROGRESS NARRATIVE (double spaced)

# FORMAT I

## ON COMPANY/AGENCY LETTERHEAD

*Project Start Date – March 31, 2001*

### BEN FRANKLIN FUNDS EXPENDITURES

**Project No.** \_\_\_\_\_

(Use Separate Form for Each Co-Sponsor)

<u>Category</u>	<u>Project Start December 31, 2000</u>	<u>January 1, 2001 March 31, 2001</u>	<u>Total</u>
Salaries (list titles)	_____	_____	_____
Fringe Benefits	_____	_____	_____
Supplies	_____	_____	_____
Travel	_____	_____	_____
Consulting (list titles)	_____	_____	_____
Telephone	_____	_____	_____
Printing	_____	_____	_____
Other (list)	_____	_____	_____
Total	_____	_____	_____

I hereby certify that all expenditures are for appropriate purposes and in accordance with the Agreement set forth in the Application and award document."

Signature

(Please type name and title of authorized company official)

Date of signature

**FORMAT II**

**ON COMPANY/AGENCY LETTERHEAD**

*Project Start Date – March 31, 2001*

**MATCHING FUNDS EXPENDITURES**

**Project No.** \_\_\_\_\_

(Use Separate Form for Each Co-Sponsor)

<u>Category</u>	<u>Project Start December 31, 2001</u>	<u>January 1, 2001 March 31, 2001</u>	<u>Total</u>
Salaries (list titles)	_____	_____	_____
Fringe Benefits	_____	_____	_____
Supplies	_____	_____	_____
Travel	_____	_____	_____
Consulting (list titles)	_____	_____	_____
Telephone	_____	_____	_____
Printing	_____	_____	_____
Other (list)	_____	_____	_____
Total	_____	_____	_____

I hereby certify that all expenditures are for appropriate purposes and in accordance with the Agreement set forth in the Application and award document."

Signature

(Please type name and title of authorized company official)

Date of signature

## **FUNDING/EXPENDITURES**

*Attach this form to the original of your report.*

### **BEN FRANKLIN FUNDS**

**Project No.** \_\_\_\_\_

Ben Franklin Funds will be expended by June 30, 2001:

YES \_\_\_\_\_

NO \_\_\_\_\_

If No, please estimate how much will be unexpended:

\_\_\_\_\_

# **FINAL REPORT**

**THE BEN FRANKLIN PARTNERSHIP PROGRAM**  
**YEAR-END REPORT**  
**RESEARCH AND DEVELOPMENT**

- SUBMIT:**
- a) Ten copies to the Ben Franklin Center  
115 Technology Center  
University Park, PA 16802
  - b) One copy to each project co-sponsor

**DUE: July 16, 2001**

**CONTENTS:**

*Please Double Space*

- a) COVER SHEET:
  - Year-End Report
  - Project Start Date – June 30, 2001
  - Project Title
  - Project Director(s)
  - Project Number
  
- b) SUMMARY SHEET

Results of Project: Summarize the results of your project in no more than two paragraphs. These paragraphs should include quantitative information on the project.
  
- c) PROGRESS NARRATIVE:

Progress: Explain how the project proceeded in relation to planned activities in your proposal. Include any changes in activities, scope, or direction.

Interaction with Co-sponsoring Organization(s): (if applicable)

Patents: A general description of any invention or process being reported as an application for or award of an U.S. Patent.

Economic Impact: A description of how your project has contributed (or will contribute) to the creation or retention of jobs. Include accomplishments toward or potentiality of commercialization.

**ATTACHMENTS - Submit only one copy:**

Publicity: Printed reports, publications, brochures, press releases, news articles, videos, or photographs resulting from the project.

Financial: Verification of Ben Franklin and matching funds (cash, equipment, inkind)

**YEAR-END REPORT**

**For Ben Franklin Projects Funded: July 1, 2000 – June 30, 2001**

**DUE: July 16, 2001**

To: Project Directors

Attached is the format for your YEAR-END Report.

We have included formats for you to use and, if applicable, to send to your co-sponsors for Financial Verification. These should be included with your report to the Center.

**REMINDER:**

All funds -- Ben Franklin and Matching Funds expenditures must have occurred between Project start date and June 30, 2001.

If you have any questions, please call (863-4558).

Kathleen D. Matason  
Director, Operations

**THE BEN FRANKLIN PARTNERSHIP PROGRAM**  
**YEAR-END REPORT**  
**RESEARCH AND DEVELOPMENT**

- SUBMIT:**
- a) Ten copies to the Ben Franklin Center  
115 Technology Center  
University Park, PA 16802
  - b) One copy to each project co-sponsor

**DUE: July 16, 2001**

**CONTENTS:**

*Please Double Space*

- a) COVER SHEET:
  - Year-End Report
  - Project Start Date – June 30, 2001
  - Project Title
  - Project Director(s)
  - Project Number
  
- b) SUMMARY SHEET

Results of Project: Summarize the results of your project in no more than two paragraphs. These paragraphs should include quantitative information on the project.
  
- c) PROGRESS NARRATIVE:

Progress: Explain how the project proceeded in relation to planned activities in your proposal. Include any changes in activities, scope, or direction.

Interaction with Co-sponsoring Organization(s): (if applicable)

Patents: A general description of any invention or process being reported as an application for or award of an U.S. Patent.

Economic Impact: A description of how your project has contributed (or will contribute) to the creation or retention of jobs. Include accomplishments toward or potentiality of commercialization.

**ATTACHMENTS - Submit only one copy:**

Publicity: Printed reports, publications, brochures, press releases, news articles, videos, or photographs resulting from the project.

Financial: Verification of Ben Franklin and matching funds (cash, equipment, inkind)

# FORMAT I

## ON COMPANY/AGENCY LETTERHEAD

*Project Start Date – June 30, 2001*

## BEN FRANKLIN FUNDS EXPENDITURES

**Project No.** \_\_\_\_\_

<u>Category</u>	<u>Project Start March 31, 2001</u>	<u>April 1, 2001 June 30, 2001</u>	<u>Total</u>
Salaries (list titles)	_____	_____	_____
Fringe Benefits	_____	_____	_____
Supplies	_____	_____	_____
Travel	_____	_____	_____
Consulting (list titles)	_____	_____	_____
Telephone	_____	_____	_____
Printing	_____	_____	_____
Other (list)	_____	_____	_____
Total	_____	_____	_____

"I hereby certify that all expenditures are for appropriate purposes and in accordance with the Agreement set forth in the Application and award document."

Signature

Please type name and title of authorized  
company official

Date of signature

# FORMAT II

## ON COMPANY/AGENCY LETTERHEAD

*Project Start Date – June 30, 2001*

### MATCHING FUNDS EXPENDITURES

**Project No.** \_\_\_\_\_

(Use Separate Form for Each Co-Sponsor)

<u>Category</u>	<u>Project Start March 31, 2001</u>	<u>April 1, 2001 June 30, 2001</u>	<u>Total</u>
Salaries (list titles)	_____	_____	_____
Fringe Benefits	_____	_____	_____
Supplies	_____	_____	_____
Travel	_____	_____	_____
Consulting (list titles)	_____	_____	_____
Telephone	_____	_____	_____
Printing	_____	_____	_____
Other (list)	_____	_____	_____
Total	_____	_____	_____

I hereby certify that all expenditures are for appropriate purposes and in accordance with the Agreement set forth in the Application and award document."

Signature

(Please type name and title of authorized company official)  
Date of signature