



How to Complete and digitally submit your BSPE 500


Updated October 1, 2021

Locate the BSPE 500 form on the website

- ▶ Go to the website at <https://idot.illinois.gov/transportation-system/safety/grants/index>
- ▶ Click on the Forms Tab
- ▶ <https://idot.illinois.gov/transportation-system/safety/grants/forms>
- ▶ Locate BSPE 500 and click to open the form
 - ▶ You MUST use Internet Explorer to access the forms!



Complete ALL boxes at the top of the form



Illinois Department of Transportation

STEP Claim for Reimbursement

[E-mail](#) [Reset Form](#) [Lock/Unlock](#)

| | | | | |
|--------------------------------------|------------------|-------------|----------------|---------------|
| Claim Number | | | | Date Prepared |
| 001 | | | | 11/17/21 |
| Reporting Agency | Project Number | Prepared By | Phone | |
| County Police | HS-22-0500 | Joe Doe | (815) 444-4444 | |
| Full Address for Location of Payment | City | State | Zip Code | |
| Address from UIGA | City from UIGA | IL | 62222 | |
| Campaign | Enforcement Type | From | To | |
| Halloween | Alcohol | 10/27/21 | 10/31/21 | |

BSPE 205 has been submitted to DOT.BSPEDATA@Illinois.gov.

Agency Information

- ▶ Claim Number – Enter the claim number in order of completion.
- ▶ Date Prepared - Use drop down calendar to select date claim was prepared.
- ▶ Reporting Agency – Enter the agency name. Note: agency name may need to be abbreviated.
- ▶ Project Number – Enter project number, ex. HS-22-1234.
- ▶ Prepared By – Enter the name of the person who prepared the claim.
- ▶ Phone Number – Enter phone number of person who prepared the claim.
- ▶ Full Address – Enter address listed on page 1 of the signed UIGA.
- ▶ City – Enter city listed on page 1 of the signed UIGA.
- ▶ State – Pre-populated with IL.
- ▶ Zip code - Enter the zip code as listed on page 1 of the signed UIGA.

Campaign Information

- ▶ Campaign – Use drop-down arrow and select the enforcement campaign.
- ▶ Enforcement type – Use the drop-down arrow to select one of the following: occupant protection, alcohol, speed enforcement, distracted driving.
 - ▶ Type cannot be established until campaign is chosen.
- ▶ From – Use the drop-down calendar to select the start date of the enforcement campaign.
- ▶ To – Use the drop-down calendar to select the end date for the enforcement campaign.

Project Costs by Budget Category

- ▶ Approved Budget:
 - ▶ Enter the approved campaign or additional enforcement amount as listed in BSPE 411.
 - ▶ Please reference the BSPE 411 that was approved with your grant agreement.
- ▶ The expended this period:
 - ▶ This will auto fill from page two.
 - ▶ Please make sure the amount has rounded correctly. This form has a glitch that cannot be fixed.
 - ▶ If there is an error in the rounding, please note it body of the email and we will make note and fix it.
 - ▶ Examples of correct rounding.
 - ▶ $\$400.455 = \400.46
 - ▶ $\$100.1245 = \100.12
 - ▶ NOTE: The Total Amount of the Claim auto fills and cannot be changed.
- ▶ If the total claim amount listed at the bottom of column B is more than the approved amount and the agency only wants to claim the approved amount, they should make note of that in the body of the email when sending to IDOT for payment.
 - ▶ They should explain the Total amount claim number and write the budgeted amount request, and date.


Certification and Digital Signature

- ▶ **SKIP THIS SECTION UNTIL YOU ARE READY TO FINALIZE AND SEND THE CLAIM.**

Certification: By checking this box and signing this report (or payment request), I certify to the best of my knowledge and belief that the report (or payment request) is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the

purposes and objectives set forth in the terms and conditions of the Federal or State award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

Project Director/Authorizing Representative Signature & Date



- ▶ Once you are ready to sign, the Certification box must be clicked
- ▶ Digital Signature must be used in the Project Director/Authorizing Rep box
 - ▶ Please see the “Digital Signature Creation.pdf” on how to create this.

Personnel and Indirect Costs - Page 2

- ▶ Claim Number – Will auto-fill from page 1.
- ▶ Project Number – Will auto-fill from page 1.
- ▶ Period Covered From/To – Will auto-fill from page 1.
- ▶ Budget Category (line item) – will auto-fill Personnel.
- ▶ If you have Indirect Costs – click the “check to enter indirect costs” box and it will appear.
- ▶ No equipment or supplies.
- ▶ Full Address – Enter address listed on page 1 of the signed UIGA.
- ▶ City – Enter city listed on page 1 of the signed UIGA.
- ▶ State – Pre-populated with IL.
- ▶ Zip code - Enter the zip code as listed on page 1 of the signed UIGA.

Personnel - Page 2 Continued

- ▶ Employee Name column – Enter name of officer/deputy working the grant enforcement. If officer/deputy was receiving compensation time, please denote with (COMP) after their name.
- ▶ Dates Worked From column – Use drop down calendar to select the first date the officer/deputy worked enforcement for the campaign.
- ▶ Dates Worked To column – Use the drop down to select date officer concluded enforcement detail. (Please note, if an officer worked several days during the campaign list the date they started and the date they concluded. There is no need to list on additional lines all the detail dates they worked. The project director will ensure the officers worked the dates and times for the campaigns.
- ▶ Example, if Officer John Doe worked the Thanksgiving enforcement campaign on November 22nd, 25th, 27th, and the 29th the date range for Officer John Doe would be Dates Worked From November 22, 2021, to dates Worked To November 29, 2021.
- ▶ If the officer worked an additional campaign that spanned two pay periods, then we ask the agency to use the second (latest) pay period for the payroll date. The only time a grantee needs to list an officer/deputy twice is when they are paid one rate during the first pay period, and they receive a pay raise/COLA which effects their time and ½ rate for the second pay period.

Personnel - Page 2 Continued

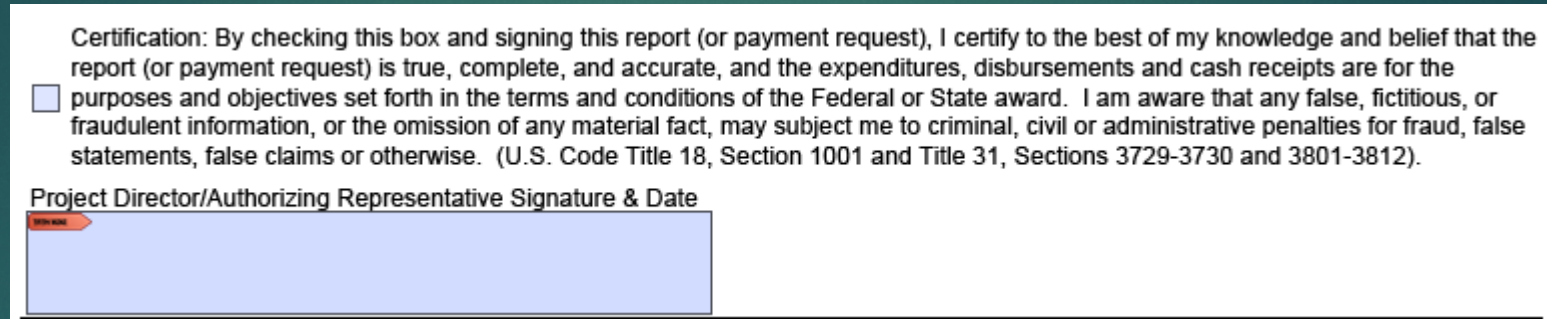
- ▶ Hireback Hourly Rate – Enter the actual hourly rate of the officer/deputy.
 - ▶ Total Claim Hours – Enter the total number of hours the officer/deputy worked during the campaign.
 - ▶ Federal Amount – Will auto-calculate the amount.
 - ▶ Payroll Date – Use drop down calendar to select date of payroll.
- ▶ Indirect Cost:
 - ▶ Personnel can be considered for indirect costs. Enter personnel totals in “amount”
 - ▶ For Percentage, enter indirect cost rate.
 - ▶ Total will auto-calculate and move to the front page.

Certification and Signature Process

- ▶ Now you are ready to use this section.

Certification: By checking this box and signing this report (or payment request), I certify to the best of my knowledge and belief that the report (or payment request) is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal or State award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

Project Director/Authorizing Representative Signature & Date



- ▶ At this point, the data entry for the claim is complete. Go back and recheck all entries to ensure they are correct, and the totals add up.
- ▶ Now you are ready to begin the signature process. You can choose from two options.

Signature Process

Choose one

Option One (Wet Signatures and Dates)

- ▶ Click the certification box on page one of the claim.
- ▶ “Print” the BSPE 500 as a PDF for traditional wet signatures.
 - ▶ In Adobe, click file, Print, print to Adobe PDF. It will save a printed version of the claim on your computer
 - ▶ Print this copy out and manually **sign and date** the claim document.
- ▶ Wet **sign and date** in the authorizing rep/project manager box. **SIGNATURE AND DATE is NEEDED.**
- ▶ After signatures, scan and save the entire document as a PDF.
- ▶ Skip to the “Claim Submission” section of this document.

Option Two (Digital Signatures) **PREFERRED METHOD OF SUBMISSION**

- ▶ Click the certification box on page one of the claim.
- ▶ Use digital signatures to sign the claim.
- ▶ The following pages will show you how to complete this. **Do not complete until reading the instructions.**

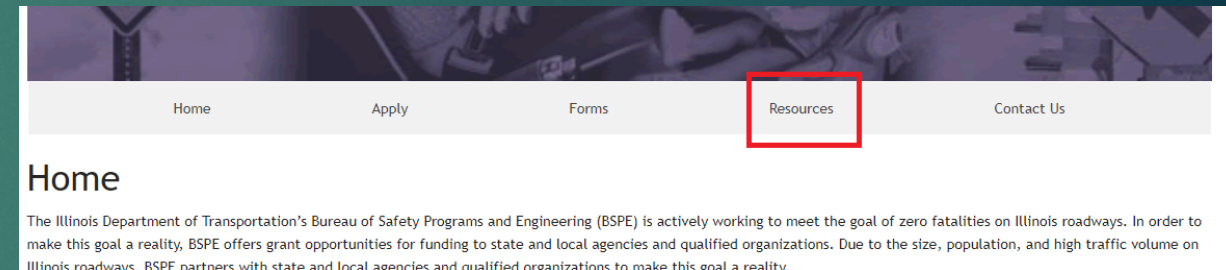
Digital Signature Process

Option Two

- ▶ Save a copy of this claim form WITHOUT any digital signatures.
 - ▶ Once you add digital signatures, save it under a different file name so you can go back and change information of the unsigned version.
 - ▶ Once a digital signature is on the form, it cannot be removed.

How do to create a digital signature

- ▶ BSPE created a thorough PDF to walk you through each step.
- ▶ You can locate the *Digital Signature Creation Guidance* at <https://idot.illinois.gov/transportation-system/safety/grants/resources>
 - ▶ Click on the Resources tab
 - ▶ Budget and Finance Section
 - ▶ Digital Signature Creation Guidance
- ▶ If you are having trouble creating a digital signature, **please contact your IT department** before requesting help from IDOT. We are unable to answer questions about your IT and software systems.



How do to create a digital signature (continued)

- ▶ Who needs a digital signature?
 - ▶ Project Director and/or Authorizing Representative.
- ▶ Keep your digital signature password somewhere safe or you will need to create a new one as the password will be required each time you need to sign the form.

Digital Signature Process (continued)

- ▶ Now that your digital signatures have been created, you can sign the claim.
- ▶ The front page of the claim is the only area that requires a digital signature.
- ▶ Once you are ready to sign, the Certification box must be clicked
- ▶ Click blue box to place Digital Signature.
- ▶ Signing is complete
- ▶ Ready to Submit digital claim.

Project Costs by Budget Category

| | A. Approved Budget | B. Expended This Period |
|--------------------------------|--------------------|-------------------------|
| Personnel | \$500.00 | \$315.00 |
| Equipment/Supplies | | |
| Indirect Costs (if applicable) | | \$31.50 |
| Total Amount of Claim | | \$346.50 |

Certification: By checking this box and signing this report (or payment request), I certify to the best of my knowledge and belief that the report (or payment request) is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal or State award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

Project Director/Authorizing Representative Signature & Date

Adam Gabany Digitally signed by Adam Gabany
Date: 2021.10.01 15:01:46 -05'00'

Claim Submission - how do I submit?

This process will be based on your chosen Signature Process

Option One (Wet Signature and Date)

- ▶ Draft an email to DOT.BSPE.Claims@illinois.gov
 - ▶ Subject of the email shall be:
 - ▶ Project Number, agency name, claim number, and dollar amount
 - ▶ Example: HS220500 County Police 001 \$346.50
 - ▶ Re-Name PDF claim
 - ▶ Same as email subject line
 - ▶ Project Number, agency name, claim number, and dollar amount
 - ▶ Example: HS220500 County Police 001 \$346.50
 - ▶ Attach claim and all supporting documents if you were unable to do so already.
 - ▶ Click Send, you have submitted your claim to BSPE. Please read last slide for confirmation information.

Option Two (Digital Signature)

- ▶ See following pages to explain the process.

The screenshot shows a claim submission form with the following fields and values:

| | | | | | | | |
|--------------------------------------|-------------------|------------------|----------------|-------|----------|----------|----------|
| Claim Number | 001 | Date Prepared | 11/17/21 | | | | |
| Reporting Agency | County Police | Project Number | HS-22-0500 | | | | |
| Prepared By | Joe Doe | Phone | (815) 444-4444 | | | | |
| Full Address for Location of Payment | Address from UIGA | City | City from UIGA | State | IL | Zip Code | 62222 |
| Campaign | Halloween | Enforcement Type | Alcohol | From | 10/27/21 | To | 10/31/21 |

BSPE 205 has been submitted to DOT.BSPEDATA@illinois.gov.


Project Costs by Budget Category

| | A. Approved Budget | B. Expended This Period |
|--------------------------------|--------------------|-------------------------|
| Personnel | \$500.00 | \$315.00 |
| Equipment/Supplies | | |
| Indirect Costs (if applicable) | | \$31.50 |
| Total Amount of Claim | | \$346.50 |

Claim Submission - how do I submit?

Digital Signature

- ▶ **First, save a copy of the form with signatures.** Use a different file name than the name you used when saving the form before collecting signatures.
- ▶ Then, scroll to the top of the form and click the *E-mail* button
- ▶ **NOTE: Once you click the E-mail button, the form locks. Absolutely nothing can be changed on this form.** This is why it is a good idea to save the form before and after obtaining signatures as different versions with different file names so you can easily go back and make edits as needed instead of filling out the form from scratch.

 Illinois Department of Transportation

STEP Claim for Reimbursement

Claim Number Date Prepared

Reporting Agency Project Number Prepared By Phone

Full Address for Location of Payment City State Zip Code

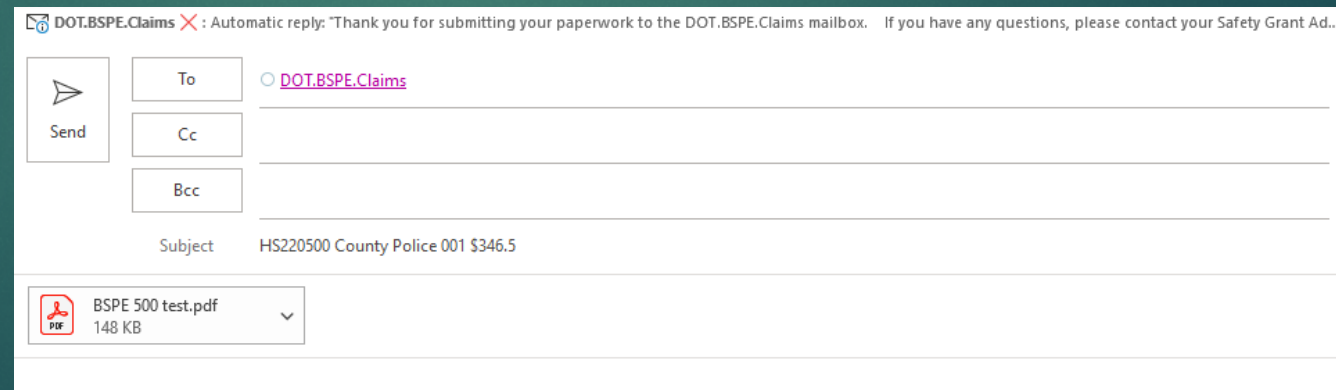
Campaign Enforcement Type From To


BSPE 205 has been submitted to DOT.BSPEDATA@Illinois.gov.

Emailing the form

Digital Signature Process

- ▶ After the form locks, an email box will auto-generate.
- ▶ The email will be sent to DOT.BSPE.Claims@illinois.gov.
- ▶ The subject line will auto-populate information filled out in the claim.
- ▶ The form itself will automatically attach to the email.
- ▶ At this time if there are any issue you can state them in the body of the claim but if not...
- ▶ Click Send





Congratulations! You have successfully submitted your BSPE claim form with digital signature!

You will receive an automatically-generated response from DOT.BSPE.Claims@illinois.gov in your email inbox. If you do not receive this response, contact your Grant Administrator.

BSPE will now begin processing your claim and may reach out if there are any issues.

If your agency hasn't received payment within 60 days, contact your Grant Administrator.