#### How-To: Submit a Capital Payment Request

#### **GPD Provider Webpage**

#### Step 1: Log into eGMS

Access eGMS: https://hmlsgrants-va.mod.udpaas.com/s\_Login.jsp

- Your agency's eGMS point of contact logs into the system
- Enter your email address and password and click the Log In button:

	VHA GRANTS	
l	Login	Welcome to VHA Grant Programs Portal
	S Email	Welcome to the Department of Veterans Affairs grants management portal for
	Snow.White@gmail.com	VHA's Homeless and Office of Mental Health and Suicide Prevention Grant Programs. This portal supports a variety of grant functions associated with the
	Password	Supportive Services for Veteran Families (SSVF), Grant and Per Diem (GPD), and
	•••••••	SSG Fox Suicide Prevention Grant Programs (SSG Fox SPGP) Programs.
	Log In 🚽	Note: After 5 unsuccessful log-in attempts you will be locked out of the system.
	Forgot Password?	For technical questions or issues, please contact SSVF@va.gov,
	-	GPDgrants@va.gov or VASSGFoxGrants@va.gov for further assistance.
1	New to the System?	
	Register	

## Step 2: From the Main page, select the GPD Program shortcut



From the eGMS GPD Grants page look under **My GPD Applications & Grants** for the **Capital FAIN/Grant ID** for which you would like to submit a payment request.

<b>■ My GPD Applications &amp; G</b>	ants				+
DRAFT (11)	APPROVED (8)	≡CLOSED (0)			
₿•				×Q	1-8 of 8 < >
🔳 # Program 🔶	Туре	FAIN/Grant ID	Organization Name	Status	Created Date \$
□ 1 Grant and Per Diem	Capital Grant	TEST234-2370-402-CG-22	GPD TESTING, INC	Approved	03/11/2021 13:34
2 Grant and Per Diem	Capital Grant	TEST234-2494-402-CG-22	GPD TESTING, INC	Approved	05/03/2021 16:01

### Step 4: Navigate to Request Activity tab

When the grant record opens it defaults to the Overview tab. Navigate to the **<u>Request Activity</u>** tab on the far right and select this tab.

	Program:	Grant and Per Diem		Legal Name:	GPD TESTING, INC	
	Due Date:	02/18/2021 16:01 👔		Organization Name:	GPD Testing, Inc.	
	Owner:	C Anna Watson	Ä 🗹	DUNS:	99	
т	Tax ID/EIN:	99		FAIN/Grant ID:	TEST234-2077-539-CM-22	
		Generate Application Summary				
i Instruct Applicar	ctions nts must car	efully review the GPD Case Management NOI	FA as this is the authoritative source for	r guidance regarding application requirements. Applicants must complete all re	equired fields in the template and attach a properly completed Application for Federal	
Assistar	nce (SF-424)	), Letter of Intent, and 2-year budget. Note, the	e required language in the Letter of Inter	nt and funding limitations related to certain budget items is described in the NC	JFA.	
OVERVIEW E	XTERNAL A	TTACHMENTS GRANT CONTACT	EQUEST ACTIVITY			

## Step 5: From the REQUEST ACTIVITY tab; select CREATE Quarterly Report

#### From the Request Activity tab select the Create HHS Payment Request (blue button)



## Step 6: Open Create HHS Payment Request; complete form

# **Step 1:** Complete the form (Amount Requested, Name, Title, Email); instructions for each field must be followed exactly or the activity will be returned for corrections

← 👻 Actions 🕶			
Туре:	HHS Payment Request	Organization Name: GPD TESTING, INC	•
Grant ID:		Status:	
* Amount Requested:			
This amount must match exactly to the amount requested in HHS Division of Payment Management System			
* SF-270, SF-271, and/or In	voices		
Grantees must upload the S incurred related to this payr	F-270 (acquisition) or SF-271 nent request must be attache	(rehabilitation/construction) that corresponds to the payment draw request in HHS. Additionally, associated invoices to substantiate costs d. Failure to provide the proper documentation will result in your request being rejected.	
Click Save before adding att	achments		
AUTHORIZED SUBMITTING			
Subject to the provisions of the foregoing is true and co	the Program Fraud Civil R rrect.	emedies Act of 1986 (18 USC 287 and 31 USC 3729); and False Statements Act (18 USC 1001), I declare to the best of my knowled	ge
* Authorized submitting office	cial's name		
* Authorized submitting office	cial's title		
* Authorized submitting offic	cial's email		
		B Save Draft	

Step 2: Click Save Draft for the upload documents button to appear

Step 3: Upload all relevant forms and invoices for payment



#### Step 4: Verify all your documents were uploaded and appear under "File Name"

* Upload SF-270, SF-271 and Invoices		
1. Upload the SF-270 (acquisition) and/or SF-271 (rehabilitation/construction) that corresponds to the payment draw request in HHS. 2. Upload associated invoices to substantiate costs incurred related to this payment request. Advances are <u>NOT</u> authorized, except for acquisition of land or a facility. Failure to attach the proper documentation will result in your request being rejected.		
File Name	Size	Date
SF270.pdf	189.9 KB	12/13/2021 08:10
		Total Files: 1

# **Step 5:** Click "Submit" **Your request will not come through to our office without this step**\*

AUTHORIZED SUBMITTING	
Subject to the provisions of the Program Fraud Civil Re correct.	medies Act of 1986 (18 USC 287 and 31 USC 3729); and False Statements Act (18 USC 1001),
* Authorized submitting official's name	
First Last	
* Authorized submitting official's title	
CFO	
* Authorized submitting official's email	
firstlast@gmail.com	
	🔀 Save Draft Submit

## Step 7: Navigate to GPD page; activity should be in pending status

After submitting the payment request, navigate back to the GPD Grants page (shown in step 2) and your activity/task will indicate **Submitted** status.

GPD program staff will review your request and reach out to the identified point of contact, if there are questions/issues. Grantees may only request funds once they have CFM approval.

E My GPD Tasks				+
TASKS (66)				
₽			×	1-20 of 66 < >
# Organization	Name 🗘 🗘 Grant Type	FAIN/Grant ID	Activity Type	≑ Status
□ 17 GPD TESTING	G, INC Capital Grant	TEST234-2494-402-C	G-22 HHS Payment Request	Submitted
18 GPD TESTIN	G, INC Capital Grant	TEST234-2822-402-C	G-22 HHS Payment Request	Draft

## Step 8: Approval; activity complete

Grantee will only be notified if corrections are needed, otherwise it will be reviewed and accepted for payment. Grantees will see the request updated to *Approved* status under "My GPD Tasks" AND our office will process the corresponding payment request in HHS. Funds will be sent to the organization via EFT.

My	GPD Tasks				+
TASKS (6	55)				
Ŀ				×Q	1-20 of 65 < 📏
<b></b> #	Organization Name	Grant Type	FAIN/Grant ID	Activity Type	≑ Status ≑
1	GPD TESTING, INC	Capital Grant	TEST234-2849-570-CG-22	HHS Payment Request	Approved
2	GPD TESTING, INC	Capital Grant	TEST234-2849-570-CG-22	HHS Payment Request	Draft

For future payment requests, complete another Create HHS Payment Request activity/task.