



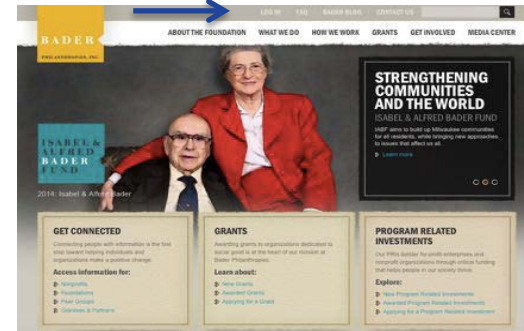
Grant Agreement Guide Pages

Completing Grant Agreement

- You will receive an email when your grant has been awarded. After which you will have to log into your online portal to submit a grant agreement.

Log In

- Go to bader.org
- Click LOG IN

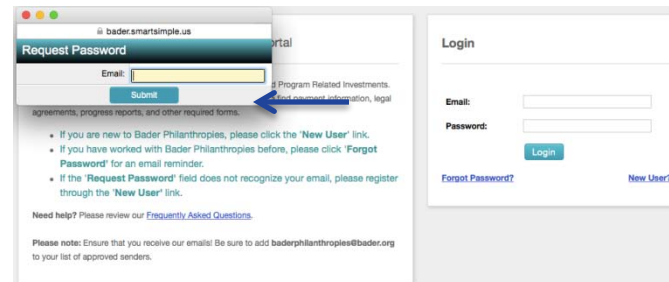
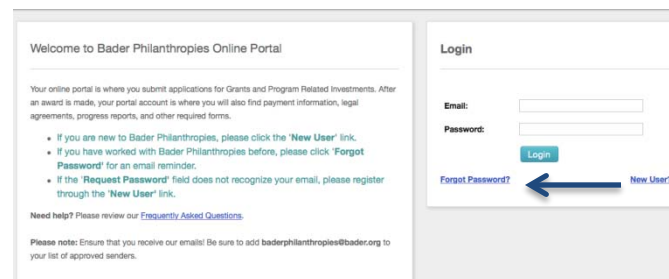
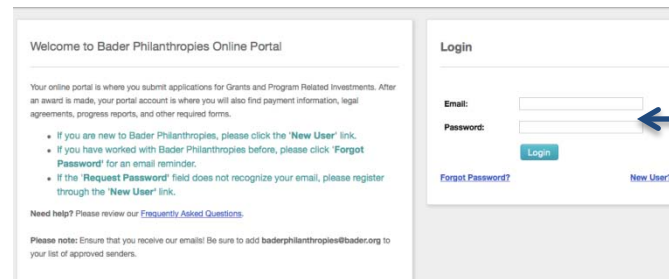


- Enter Log in Information

A screenshot of the Bader Philanthropies Online Portal login page. The page is titled 'Welcome to Bader Philanthropies Online Portal' and contains a 'Login' form. The form has fields for 'Email:' and 'Password:'. A blue arrow points to the 'Password:' field. Below the form are links for 'Forgot Password?' and 'New User?'. The page also includes a 'Need help?' section with frequently asked questions and a 'Please note' section at the bottom.

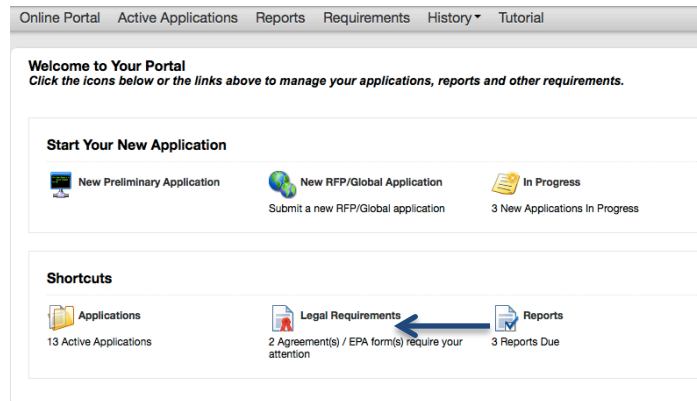
Log In

- Enter Your Email & Password
- If you forgot your password Click Forgot Password
- Enter Your Email & Click Submit; A temporary password will be sent to your email



Completing Grant Agreement

- Click the **Legal Requirements Icon**



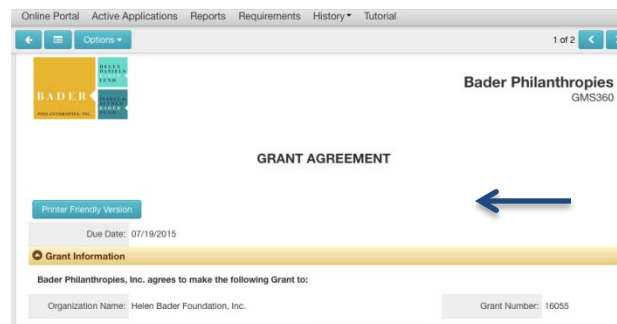
- Select Grant Agreement

The screenshot shows a table titled 'Agreement Required'. At the top right, there is a 'Sort By:' dropdown menu set to 'Default' and an 'Asc' button. The table has the following columns: 'Type', 'Project Title', 'Organization Name', 'Date Created', 'Status', and 'Due Date'. There are two rows of data:

Type	Project Title	Organization Name	Date Created	Status	Due Date
Grant Agreement	16055: Test cc email	Helen Bader Foundation, Inc.	06/04/2015	Unsubmitted	07/19/2015
EPA	16456: Testing Dues brd members	Helen Bader Foundation, Inc.	05/27/2015	Unsubmitted	06/27/2015

A blue arrow points to the 'Grant Agreement' row.

- Scroll Down to **Review Grant Agreement**



Completing Grant Agreement

- Enter Governing Officer or Designated Signatory
- Enter Submission Date
- Click **I Agree** to Accept Terms of Agreement

Online Portal Active Applications Reports Requirements History Tutorial

← Options 1 of 2 < >

* By: Board Elected Governing - Officer or Designated Authorized Signatory

Lisa Hiller

* Title

President

* Date Submitted: 06/04/2015

* Acceptance Verification
By checking the box below, you accept the terms set forth in this Agreement

I Agree

EPA Details

You have submitted the following details in your Organization Profile which will be used to process scheduled payment(s). This will appear blank if it is your first time using this system:

Save & Finish Later Submit

Completing Grant Agreement

- If blank, enter **EPA Details**
- If information is already populated from Organization Profile, confirm **EPA details**. If information is correct, click submit
- If a permanent change needs to be made, edit **EPA Details** in the Organization Profile
- If a one time change needs to be made, edit **EPA Details** in the Grant Agreement

Online Portal Active Applications Reports Requirements History Tutorial

Options 1 of 2

EPA Details

You have submitted the following details in your Organization Profile which will be used to process scheduled payment(s). This will appear blank if it is your first time using this system:

- If you wish to change the payment details for this **single grant** you may do so below.
- If you wish to change your default payment details for **all future grants**, please update this information as it appears within your [Organization Profile](#).

* FINANCIAL INSTITUTION:	testing	* CHECKING or SAVINGS:	Checking
BRANCH ADDRESS:	Milwaukee	CITY:	Milwaukee
ZIP CODE:	53202	ROUTING/TRANSIT/ ABA/IBAN #:	343434343

Save & Finish Later Submit

Completing Grant Agreement

- Click Submit

The screenshot shows a web browser window with the following elements:

- Navigation bar: Online Portal, Active Applications, Reports, Requirements, History, Tutorial
- Page indicator: 1 of 2
- Section title: EPA Details
- Text: You have submitted the following details in your Organization Profile which will be used to process scheduled payment(s). This will appear blank if it is your first time using this system:
- Instructions:
 - If you wish to change the payment details for this **single grant** you may do so below.
 - If you wish to change your default payment details for **all future grants**, please update this information as it appears within your [Organization Profile](#).
- Form fields:
 - * FINANCIAL INSTITUTION: testing
 - * CHECKING or SAVINGS: Checking
 - BRANCH ADDRESS: Milwaukee
 - CITY: Milwaukee
 - ZIP CODE: 53202
 - ROUTING/TRANSIT/ ABA/IBAN #: 343434343
- Buttons: Save & Finish Later, Submit (indicated by a blue arrow)



Once your Grant Agreement and EPA details have been reviewed, payment will be processed.