UtahStateUniversity.
CONTROLLER'S OFFICE
SPONSORED PROGRAMS ACCOUNTING

Certification of Fixed Price Project Completion

I certify that all project objectives have been successfully completed and all appropriate direct costs have been charged to the project.

_____ funded by _____
Grant Number Sponsor

_____ _____
Index Fund

Based on the budget awarded by the sponsor, I certify that expenditures on the grant/match index number(s) reflect all costs needed to provide the sponsor with the required deliverables. The cash received on this fixed price project is $_____, the expenditures total $_____, leaving a balance of $_____.

I understand that prior to a transfer of any residual balance, funds will first be used to recover the indirect cost amount calculated on the balance noted above, using the full federally-negotiated Facilities and Administrative (F&A) rate at initiation of the award. The indirect cost amount will be distributed according to the current distribution method.

Any balance remaining (after the above) which is:

• 25% or less of the funded amount will automatically be transferred to the unrestricted account specified below.

• Over 25% of the funded amount will be transferred upon receipt and approval of this form and the accompanying explanation of the variance between the project budget and the actual amount expended. Explanations will be reviewed by a committee consisting of a representative from the Vice President for Research Office, Sponsored Programs Office, and Sponsored Program Accounting.

Full federally-negotiated F&A rate in place at time project was initiated: _____%.

The F&A amount to be charged on the balance is $_____, leaving a residual amount of $_____ to be transferred to unrestricted index _____.

_____ _____
Principal Investigator Date

To the best of my knowledge, the PI on this fixed price project has provided the sponsor with the required deliverables and all appropriate expenditures have been charged correctly.

_____ _____
Department Head Date

*Submit form to your Sponsored Programs Accountant or Jennifer Jenkins (jennifer.jenkins@usu.edu) or UMC 2400.

IF residual amount is more than 25% of the funded amount, an explanation must be attached.

For Controller's Office Use Only

Sponsored Programs Accountant has reviewed for accuracy and appropriate documentation: _____ _____
SPA Initials Date

Date explanation for residual over 25% sent to committee: _____
Date

_____ _____ _____ _____
Vice President for Reasearch Office Date Sponsored Programs Office Date

_____ _____
Sponsored Programs Accounting Date