

Office of the Vice President and the Chief Financial Officer Contracts & Grants Accounting Services

#REF!

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Telephone ##

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	i					Fax ##
Memoran	<u>aum</u>		Date:	#REF!		
To:	#REF!		Date.	#INLI:		
Cc:	#REF!					
	#REF!					
From:	#REF!					
RE:	Fixed Price Award – Clo					
	Agency:	#REF!				
	Title:	#REF!				
	UF Contract #	#REF!				
	UF Project #	#REF!				
	-	•	sing your above referenced projeceipt. Fax/email transmittals an	•	the requested informati	on and return this
Our recor	ds indicate the following in	nformation:				
Award Amount: #		#REF!	Project Expirat	ion Date: #REF	:1	
Payments Received:		#REF!	F&A Rate / Bas			
Less Total Expenditures:		#REF!	Tan Nate / Bas	ic #NLI	· WILL:	
Equals Unexpended Funds:		#REF!				
Lquuis Oi	техреписи гипиз.	WILL:				
Direct Dollars Unexpended #REF! Residual Balance		Indirect Dollars Unexpended #REF! Indirects will be distributed following UF's Indirect Cost Return Policy				
If you disc	gree with this information	olease contact o	ır office immediately for resoluti	on.		
Funds will be distributed as follows: PI distribution:		#REF!	Please provide the destination 212 Residual or 214 Clinical Trials Operating Fund chartfield:			
			Project #	Fund	Dept ID	Program Code
			If you need to open a new Mi submit a request to DSR with	-	•	•
, ,	ee with this information, th lars Unexpended should be	•	ed to process the unexpended b is office.	alance. Please indica	ate below (select one of	the three options) how the
[] Do no	er these funds as indicated t close this Project. An extension all unexpended funds to t	ension of time is	•	n)		
Comment	s:					
Please rev	view and sign this affirmation	on:				
completed terms. Fu	al Investigator, I affirm all v d and provided to the spons rther, that all costs made in ged accordingly and in com award.	oring agency per support of this p	the award roject have	F!		

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Principal Investigator

Date