

Fixed Price Agreement Closeout Worksheet

PI: _____	Grant Number: _____
Sponsor: _____	Fund Number: _____
Project Title: _____	Start Date: _____
	End Date: _____
Funded Amount: _____	F& A Rate _____
Expenses: _____ #DIV/0!	F&A Equivalent: _____ -
*Balance: _____ - #DIV/0!	Residual to PI: _____ -

**If remaining balance 15% or greater than Funded Amount please answer questions below:*

1) Were all deliverables submitted and accepted by the Sponsor?

Yes ☐ No ☐

Comments: _____

2) Were all project expenses charged to the Sponsored Fund associated with the Project?

Yes ☐ No ☐

Comments: _____

3) Were all of the costs incurred to complete the project charged to this grant/fund?

Yes ☐ No ☐

If not, approximately how much was charged elsewhere? _____

Where were these costs charged? _____

Why were they not charged to this project? _____

4) If all incurred costs were charged to this grant/fund, what was the reason for the significant difference between budget and actual?

5) Have all final costs been reviewed and confirmed to be in compliance with any applicable sponsor terms and conditions, federal guidelines, and GMU policies?

Yes ☐ No ☐

6) Please provide any other details that would explain the reason for the large residual balance.

**All applicable approval signatures are required before funds will be transferred.*

Principal Investigator
(signature required if balance greater than 15%)

Date

Department Chair
(signature required if balance greater than 15%)

Date

Dean or Director
(signature required if balance greater than 15%)

Date

Controller
(signature required if balance greater than 35%)

Date

**If remaining balance less than 15%, or over 15% and all questions answered yes with applicable approval signatures, remaining balance will be moved to the PI Pool Org.*

PI Pool Org:

Date Moved:

OSP Authorized Official

Date