Grants and Contracts Accounting
Box 843039; 800 E. Leigh Street, Suite 3100
Richmond, Virginia 23284-3039

M E M O R A N D U M – 90 DAYS NOTICE
Grant/Contract and Fixed Price Agreement Close-out

FROM:
  Grant Accountant

TO:
  Fiscal Administrator

DATE:

  RE: **Index:**   **Fund:**   **Grant Code**:

  Principal Investigator: **Sponsor**:

  FP or PT/PD/SC #:   **Type:**

Based on the monthly review of accounting records for VCU sponsored program indexes, the above referenced index has a budget period which terminates on _____ . Please indicate which action is required by selecting (**X**) one of the following options:

  Options: 1. Additional years/Additional funding; 2. Supplemental funding; 3. No-Cost Extension only; 4. Final year; 5. Close out and pool

_____1. There will be an additional budget year with additional funding. (Multi-year projects with annually awarded budgets-**DOES NOT INCLUDE EXTENSIONS**)
Provide new FP number if appropriate/available
If anticipated funding is not received, the   **Department Chairperson/P.I.   (**circle one-Responsible Party for the committed Index**) agrees that the Alternative Non-sponsored Banner Index _____ will cover any charges of the project incurred after the expiration date of the current index. The alternative Non-Sponsored Banner Index will only be used if an award notice is not received by the University within 60 days after the current expiration date of the project, or if the index is in a deficit.

Note: If an individual will <u>not</u> be working on the continuation/renewal or extension of this project, please submit a Personnel Action Form (PAF) to change their labor distribution through the appropriate channels; or If there are individuals who should be charged to the additional year of this project, please submit the PAF with the proper labor distribution effective date through the appropriate channels.

_____
FA Signature   **Date**

_____2. There will be Supplemental funding for this project and the end date on the award will be extended to _____. **Provide new FP number if appropriate/available**

Alternative Non-sponsored Banner Index _____; (see #1** above for explanation). I understand that I will need to separately contact the Office of Sponsored Programs directly if an extension is needed.
The Banner Termination Dates will be extended to allow charges to continue to be processed, however, the Banner Budget Period End Date on FRMFUND will not be changed until G&C receives a Snapshot from OSP indicating an approved change in the end date.

_____
FA Signature   **Date**

_____3. There will be a No-Cost Extension (NCE) beyond the original end date of this project or sub-award/sub-Index without additional funding until _____ (Please insert new end date requested with (NCE). Alternative Non-sponsored Banner Index _____; (see #1** above for explanation). I understand that I will need to separately contact the Office of Sponsored Programs directly if an extension is needed. **The Banner Termination Dates will be extended to allow charges to continue to be processed, however, the Banner Budget Period End Date on FRMFUND will not be changed until the G&C Accountant receives a Snapshot from OSP indicating an approved change in the end date.**

_____
FA Signature   **Date**

_____4. This is the FINAL YEAR of the project. A new Banner Index is **not** required.

_____
FA Signature   **Date**

_____5. Close-out this Fixed-Price Agreement (**G&C Accountant will electronically send the form directly to the FA regardless if the remaining cash balance is zero, or if there is a deficit cash balance. When the applicable, G&C will also email a copy the SOM Dean's Office at somresadmin@vcu**):

OSP Post-Award Certification - "I certify that the above referenced project is a fixed price agreement."

_____   _____
        OSP Signature   **Date**

G&C Certification – "I certify that the fixed price agreement has been fully invoiced and that all payments have been applied towards the Index. If the final invoice is subject to final reporting or deliverables, the return of this Notice with the P.I. certification below will initiate the final invoice process by G&C."

_____   _____
        G&C Accountant Signature   **Date**

FA Certification - "I certify that the fixed price agreement has been charged for all work performed for the agreement and that no costs to be funded by the sponsor have been billed to other sponsored agreements, patient clinical trials, or absorbed by VCU, the VCUHS or VAMC. If this fixed price agreement is an Industry Clinical Trial, I am certifying that invoices have been submitted for all agreed payments. This leaves a cash balance of $ _____."

(CHECK ONE)

_____ Please transfer the remaining funds to pool index number/s. _____

_____ The P.I. does not have a pool index; please create an index.

_____   _____
        Fiscal Administrator Signature   **Date**

Please have the below responsible officials acknowledge review of this Notice/Fixed Price Close-out, certifying to the below statement, and returning this memo along with the Fixed Price Agreement Closeout Form within 10 days to Grants and Contracts Accounting, or emailing it to GCAVCU@vcu.edu.

        PI Certification - "I certify that all contractual obligations as required by this agreement have been completed to the satisfaction of the sponsor and approve the close-out of this award or sub-award/sub-index."

_____   _____
Principal Investigator   **Date**   **Department Chairperson**   **Date**