Notice of Grant or Contract Award
Sponsored Projects Administration

AWARD INFORMATION

Proposal Type: New
Award Type: Research Grant
Principal Investigator: Hamilton, David W
Email: dwh@umn.edu
Academic Unit: UMC-BOOKSTORE
Sponsor: NIH NATL INST OF HEALTH
Sponsor Award #: R01 HL11111-01
Project Title: Proposal Title would appear here.

COMMENTS

This is where award comments would appear.

BUDGET INFORMATION

Current Budget Start Date: 01/01/2003
Current Budget End Date: 12/31/2003
Current Direct Cost: $100,000.00
Current F&A Cost: $50,000.00
Total Current Award Amt: $150,000.00
Future Funding: 2
F&A Rate: 48.5%

SPECIAL REVIEWS

Animal Subjects: A (Protocol # 9999A99999)
Chemicals: Y
Patents: Y

COST SHARE:

Item 1: Amount: $10,000.00
Description: Copy Machine
Account: 1111-111-1111

COST SHARED EFFORT

Name: Brittany Ann Lloyd
Role: Co-Investigator
Unpaid Effort: 5%
TERMS

REGULATORY TERMS:
• 45 CFR Part 74 - Code of Federal Regulations as it pertains to institutions of higher education.
• OMB Circular A-133
• OMB Circular A-21

U OF M REQUIREMENTS TERMS:
• All U of M policies and guidelines relating to research must be followed and can be read in detail at http://www.ospa.umn.edu/policiesmanuals&education/policies/respolicy.htm
• Salary cost transfers cannot be made after effort is submitted.
• The U of M Effort Certification system must be used to reflect all U of M staff effort on this project, whether or not any salary is charged to the project.
• U of M Cost Transfer guidelines state transfers of non-salary expenses on accounts be clearly documented & made within 30 days after the end of the accounting period the charge was processed.

REPORTS

FISCAL INVOICE REPORT

Report Type: SF 269 - financial status report
Responsibility: SFR
Report Detail: Sponsor Budget Cats
Report Frequency: 45 Days after expiration of End of Budget Period
Final Rpt Frequency: 45 Days after expiration of Termination/Final

Contact Name: John Doe
Contact Phone: 301 496 4000
Contact Address: 9000 Rockville Pike
Bethesda, MD, 20892

INVOICING/BILLING INFORMATION

Basis of Payment: Cost Reimbursement
Invoice Form: Standard UMN Invoice
Invoice Frequency: Quarterly
Interim Invoice Deadline: 45 Days After End of PD

Method of Payment: Expense Invoice
Invoice Detail: Sponsor Budget Cats
Final Invoice Deadline: 45 Days After End of PD
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GENERAL PROVISIONS

This document is intended to provide guidance in managing this award, to the Principal Investigator, Academic Unit, and to those who are noted as receiving this document. Its intent is to provide general information regarding University and sponsor policies when given the award. In addition, it is intended to reference specific conditions related to this award. Specific questions should be addressed to the grant administrator from SPA noted below. By accepting this award, the Principal Investigator acknowledges and agrees to abide by all provisions of the sponsoring agency and the University of Minnesota policies related to sponsored projects management, including the Code of Conduct.

PI Signature: ___________________________ (future requirement) Date: ___________________________

AGENCY CONTACTS

Contact Name: John Doe
Contact Phone: 301 496 4000
Contact Address: 9000 Rockville Pike
Bethesda, MD,  20892
Contact Type: Administrative Contact
Contact Email: jdoe@nih.gov

U OF M CONTACTS

Administrative questions to SPA staff member: Hoehn, Debbi (hoehn004@umn.edu) 612-625-3874
Billing and financial questions to SFR: Susan Harris (harri140@umn.edu) 612-624-7850