Appendix L: **PRINCIPAL INVESTIGATOR SUBAWARD CLOSEOUT AUTHORIZATION**

Please complete this form in its entirety, including signature by Principal Investigator (PI) or

Approved Designee. Send completed form to the Sponsored Programs Administration office

at [subteam@ordmail.umaryland.edu](http://subteam@ordmail.umaryland.edu) within 10 business days. Contact 410-706-6723 with any

questions.

1. UMB Principal Investigator Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. a. Subaward Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b. Project ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

c. Subaward Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

d. Subrecipient Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

e. Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To officially complete and closeout our subaward record, your signature below is

required. By signing, the UMB Principal Investigator attests to the fact that:

* All terms and conditions of the above reference subaward have been met;
* You are satisfied with the performance of the subrecipient; and
* No further action is required by subrecipient prior to closeout.

The UMB Principal Investigator also attests that:

* All Final Technical Reports and/or deliverables required under the above referenced subaward have been received by the UMB Principal Investigator and deemed acceptable; and
* The subawardee’s Final Invoice has been received and approved by the UMB PI and there are no additional outstanding claims to be filed against this subaward.

Principal Investigator

Name:

Signature: Date:

Approved Designee

Name:

Signature: Date: