

**Grant - Closeout Reconciliation Sheet**

**Return to Grant Accounting by:**

Grant number:  
 Fund number:  
 Total budget:  
 End date:  
 Funding agency:  
 Principal Investigator:  
 Department:

Attach a copy of Banner screen FRIGITD(Grant inception to date)

Acct Code	Description	Awarded Budget	Adjustments Additions/Subtractions	Final Total of Expenses
6115	Part-time Faculty			
6120	Summer Pay Faculty			
6132	Non exempt staff			
6139	University Workstudy			
6140	Graduate Assistants			
6300	Benefits			
70051	Supplies			
70271	Equipment Maintenance			
70791	Stipends			
74101	In-State Travel			
74151	Out-State Travel			
75011	Equipment			
7299	Indirect Cost			

Total 0.00 0.00

If applicable, transfer residual balance to Banner Fund: \_\_\_\_\_

As PI, I certify that all expenditures reported above are for appropriate purposes and in accordance with the agreement set forth in the application and award documents.

Certified:

\_\_\_\_\_  
Principal Investigator

\_\_\_\_\_  
Date: