



This routing form has been updated on 18 August 2014. It supersedes ALL previous versions.

Office of Research Administration  
**PRINCIPAL INVESTIGATOR SUBAWARD CLOSEOUT  
AUTHORIZATION**

[www.ora.umd.edu](http://www.ora.umd.edu)

Please **complete this form in its entirety**, including signature by Principal Investigator (PI) or Approved Designee. Send completed form to the University of Maryland Compliance Office at [oraacompliance@umd.edu](mailto:oraacompliance@umd.edu) within 10 business days. Contact 301-405-6280 with any questions.

1. **UM Principal Investigator Name:**

2. a. **Subaward Number:**

b. **KFS Account Number:**

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 UM Principal Investigator attests to the fact that

- a) all **terms and conditions** of the above referenced subaward have been met;
- b) you are satisfied with the **performance** of the subrecipient; and
- c) **no further action** is required by the subrecipient prior to closeout.

The Principal Investigator also attests that

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

Principal Investigator  
Name  
Signature

Date

Approved Designee  
Name  
Signature

Date