

GRANT CLOSE OUT CHECK LIST
Project #: _____

Principal Investigator/Project Director: _____

Direction: The items checks as applicable need your review and action.

ITEM	APPLICABLE (Please ✓ check applicable)	COMPLETED (Please ✓ check applicable)	EXPECTED TO BE COMPLETED BY THIS DATE
Final report submitted.			
Time and Effort reporting documents for all project team members are signed and sent to ORSP.			
All part-time and student workers are signed and sent to ORSP.			
Cost sharing obligations have been met.			
Cost sharing projects have been completed.			
Disposition of classified materials have been completed.			
All revenue/expenditures are accurate.			
Account balance is zero.			
Copy of final report sent to ORSP.			
Financial reports submitted as required.			
OTHER ITEMS THAT NEED TO BE COMPLETED AND FILED WITH ORSP, IF APPLICABLE.			
Subcontracts closed.			
Consulting agreements closed.			
Subcontracting plan reports completed.			
Contractor's release completed.			
Refunds, rebates, and credits reconciled.			
Final property report completed.			
Title to equipment resolved and documented with Property Control.			
Final patent report, patents, copyrights, and inventions completed.			
<i>Other</i>			
<i>Other</i>			

Grant Termination Date: _____

Principal Investigator/Project Director signature: _____

Confirmed by ORSP: _____ Date: _____