

Office of Sponsored Programs North End Center, Suite 4200 300 Turner Street NW Blacksburg, Virginia 24060 Phone: (540) 231-5281 Fax: (540) 231-3599 www.osp.vt.edu

SUBAWARD CLOSE OUT

Subaward Agreement No:

Please complete the following and return to:

1. Intellectual Property:

Are there any inventions to be reported which resulted from work performed under this agreement?

No Yes (If yes, a complete invention disclosure must accompany this document. Invention reporting shall be in the same form as required by the sponsor.)

2. Equipment:

a. Was any equipment provided by the federal government/sponsor? ____ No ____Yes (If Yes, complete the attached Inventory of Property form.)

b. Was any equipment purchased with federal or sponsor funds provided under this agreement?

No Yes (If Yes, complete the attached Inventory of Property form.)

3. Financial Information:

a. Are there any outstanding invoices which Virginia Tech has not yet reimbursed? No Yes (If yes, please attached copies of outstanding invoices previously submitted but which reimbursement has not be received.)

b. Has the Final Invoice been submitted to Virginia Tech? No Yes (If no, what is the total amount to be billed to Virginia Tech \$______

4. Assignment of Refunds, Rebates, Credits and Other Amounts:

By signing below, Subawardee/Subrecipient assigns, transfers, sets over and releases Virginia Tech all right, title, and interest to all refunds, rebates, credits and other amounts (including any interest thereon) arising out of the performance of this agreement, together with all rights of action accrued or which may hereafter accrue thereunder. Subawardee/Subrecipient further agrees to cooperate fully with Virginia Tech as to any claim or suit in connection with refunds, rebates, credits, or other amounts due (including any interest thereon) to execute any protest, paper, application or other papers in connection therewith.

5. Certification: By signing below, Subawardee certifies that all work has been fully completed and effort has been expended on this research project.

Authorized Official's Signature:		Date:
Printed Name:	Title:	

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