UNIVERSITY OF COLORADO AT BOULDER

Certification of In-Kind Cost Sharing Contributions

For Completion by Individuals or Organizations Participating in UCB Grant Programs

Thank you for participating in the following grant program at the University of Colorado at Boulder. Federal and University policies require that we request the following information in order to report to our sponsors the equivalent monetary amounts for your non-cash contributions. Contributions, to be considered allowable for reporting purposes, must be incurred during the grant period (listed below) and must be consistent with the grant sponsor guidelines. Questions regarding allowable costs should be addressed to the Grant Principal Investigator listed below. Completion examples for this form are on Page 2.

For Individuals: Contributions may include personal time at appropriate rates for the type of services rendered, communication and transportation costs and miscellaneous expenses incurred in direct relationship to the grant for which you were not reimbursed.

For Organizations: Contributions include actual costs for staff time and fringe benefits, services, supplies or other allowable (indirect or administrative costs may be included if you have a federally approved rate) organization costs which were not reimbursed by the grant.

Grant Sponsor: ____________________________
Grant Award Number: ______________________
Grant Title: _______________________________________________________________________
Grant Principal Investigator: ____________________________
Grant Period: ____________________________

Contributions:
Individual:
Time Period in which in-kind contributions were provided: ____________________________

Personal time: ( ) hours ( ) days ( ) months, Number ______, Value/unit $ _______
Other expenses $ _______
Total $ _______

Organizations:
Time Period in which in-kind contributions were provided: ____________________________

Staff time and benefits $ _______
Services, supplies, travel, equipment, other etc. $ _______
Indirect or Facilities and Administrative costs $ _______
Total $ _______

Individual name or Organization name (printed) ____________________________________________
Signature *: ______________________; Printed name ________________________________
Date ______________

* For organizations an administrative officer should sign.

RETURN FORM TO:
Examples

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EXAMPLE for an INDIVIDUAL

Grant Sponsor: National Science Foundation
Grant Award Number: EMC 0112345
Grant Title: Biomass Monitoring in the Willamette Valley
Grant Principal Investigator: Edwin Johnson
Grant Period: June 1, 2001 – May 31, 2004

Contributions:

Individual:
Time Period in which in-kind contributions were provided: June 1-July 20, 2003

Personal time: ( ) hours (X) days ( ) months, Number: 20 Value/unit: $ 100 $ 2,000
Other expenses

Total $ 2,045

Individual name or Organization name (printed): Marilyn Marsh

Signature *: ________________________, Printed name: ______________________
Date: 7/9/03

* The contributing individual should sign; for organizations an administrative officer should sign.

EXAMPLE for an ORGANIZATION

Grant Sponsor: National Science Foundation
Grant Award Number: EMC 0112345
Grant Title: Biomass Monitoring in the Willamette Valley
Grant Principal Investigator: Edwin Johnson
Grant Period: June 1, 2001 – May 31, 2004

Organizations:
Time Period in which in-kind contributions were provided: August 1 – December 31, 2002

Staff time and benefits $ 7,500
Services, supplies, travel, equipment, other etc. $ 675
Indirect or Facilities and Administrative costs $ 2,300

Total $ 10,475

Individual name or Organization name (printed): Mid-Willamette Environmental Consortium

Signature *: ________________________, Printed name: Ray Gundersen, Director
Date: 7/9/03

* The contributing individual should sign; for organizations an administrative officer should sign.