



UNIVERSITY OF RICHMOND **FACULTY** SUMMER SALARY REQUEST

Full Name	UR ID	Department
Are you a part-time University Employee? Yes No		

Enter index, account, and amount of summer salary to be charged to your grant(s). Do not include fringe. Per the Uniform Guidance, payroll can not be disbursed prior to effort being expended. Please check all boxes that apply to the summer months you will be working on the grant(s) below.

INDEX		<i>MONTH WORKED</i>	<i>PAY DATE</i>	<i>MONTHLY AMOUNT</i>
ACCT		JUNE 2017	→ JUNE 30	
TOTAL AMOUNT		JULY 2017	→ AUGUST 01	
GRANT AGENCY/TITLE		AUGUST 2017	→ SEPTEMBER 01	

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In accordance with the requirements of the Uniform Guidance 200.430 (h) (2) the document which provides the guidelines for sponsored activities for educational institutions, salaries for sponsored agreements must produce a proportionate distribution of charges for the employees' activities. I understand that this grant will pay me approximately _____% of my salary in the 16/17 fiscal year, and I certify that I will spend at least that percentage of my time on this grant.

Principal Investigator Signature	Date	Grants Accounting Office Signature	Date
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Return the completed form via email to grants@richmond.edu, or click Submit Button. **Submit by May 31, 2017**