

NC State University
Uniform Guidance Certification for Closeout Process

"By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. "

Principal Investigator (Lead PI, Co-I), *Required*

Date

Department Head, Optional

Date

Research Dean, Optional

Date

University Business Officer, Optional

Date

Miscellaneous, Optional

Date