

CHECK REQUEST FORM



Date of Request: Click or tap to enter a date.

Principal Investigator (PI) Name: Click or tap here to enter text.

PI Email: Click or tap here to enter text.

Organizational Representative (OR) Name: Click or tap here to enter text.

OR Email: Click or tap here to enter text.

Date of Award: Click or tap to enter a date.

Project End Date: Click or tap to enter a date.

Project Title: Click or tap here to enter text.

Organization: Click or tap here to enter text.

AANAF Grant Number: Click or tap here to enter text.

Total Budget Approved: \$ 0.00

Total Amount Previously Invoiced: \$ 0.00

Amount of Funds Remaining: \$ 0.00

Amount Requested for Disbursement: \$ 0.00

CHECK INFORMATION

Make Check Payable to: Click or tap here to enter text.

Mailing Address

Organization Name: Click or tap here to enter text.

Address: Click or tap here to enter text.

City, State, ZIP: Click or tap here to enter text.

**BRIEF DESCRIPTION
OF EXPENSES**

For this check only. Do not refer us to another document. *Specific information must be provided in this field, consistent with what is provided on the invoice.*

ATTESTATION

I will do the following:

1. Assure the AANA Foundation has access to any documents necessary to verify expenditures as identified in the application for funding, including submission of an **Interim Progress Report** and **Invoice** for payment.
2. Submit a **Final Progress Report and Final Expenditure Report with Abstract and Relevance Statement** to the AANA Foundation within ninety (90) days of the end of the grant's final budget year/project period.
3. Assure that the capstone/dissertation or research is original and that no violation of scientific integrity has occurred.
4. Append a copy of IRB/IACUC approval or Determination of Non-Human Subjects Research for your project. We require evidence before funding.
5. Affirm that all funding was spent to support the project as identified in the application and budget, AND any unspent grant money must be returned to the AANA Foundation within 90 days of completion with a detailed accounting of all expenditures. Receipts are not required; however, the Foundation reserves the right to request receipts at any time if an audit is deemed appropriate.

Click or tap here to enter text.

Funding Recipient Signature

Click or tap to enter a date.

Date

(Office.Use.Only)

Account Number: Click or tap here to enter text.

Executive Approval: Click or tap here to enter text.

SAMPLE