Print & Reset

FEDERAL GRANT SUMMARY FORM

Reset

This *Grant Summary* form, plus the *Grant Award Letter* & *Grant Agreement* must accompany the New Fund/New Department Request form when requesting a new grant. The new fund number will not be assigned until all information is received. If any of the following information changes, a new form must be completed. Whenever you request reimbursement, copy us at: claims@vanderburghgov.org

LOCAL PROJECT NAME Name given to project	
PASS-THROUGH AGENCY AWARD NUMBER Identifying number for grant & is required	
PASS-THROUGH AGENCY AWARD NAME Name given to grant	
AWARD METHOD Choose one	ADVANCED ☐ REIMBURSEMENT ☐
INITIATING OFFICE/DEPARTMENT Name of department requesting grant	
DEPARTMENT CONTACT NAME Name of person requesting grant	
DEPARTMENT CONTACT PHONE Above named person's phone number	
DEPARTMENT CONTACT E-MAIL Above named person's e-mail address	
PASS-THROUGH AGENCY Full correct name without abbreviation	
PASS-THROUGH AGENCY CONTACT NAME Person to contact at above named agency	
PASS-THROUGH AGENCY CONTACT PHONE Person to contact's phone number	
PASS-THROUGH AGENCY CONTACT E-MAIL Person to contact's e-mail address	
FEDERAL AGENCY Can be determined by first 2 numbers of CFDA	
FEDERAL PROGRAM/PROJECT TITLE Full official name from www.cfda.gov	
CFDA NUMBER Catalog of Federal Domestic Assistance Number	
PASSED TO SUB-RECIPIENTS If money is passed to another agency	
SUB-RECIPIENTS Name(s) of sub-recipient(s) if applicable	
TOTAL AMOUNT AWARDED E-mail claims@vanderburghgov.org each time money is requested. Be sure to include the CFDA # in your e-mail.	

The following will be completed by the Auditor:

FUND NAME Same as the Federal Program/Project Title	
FUND NUMBER Will be assigned by the Auditor's Office	