

CANCER PREVENTION & Research institute of texas

TEXAS TAKES ON CANCER

CGMS GRANTEE TRAINING

October 10, 2012



1

Topics

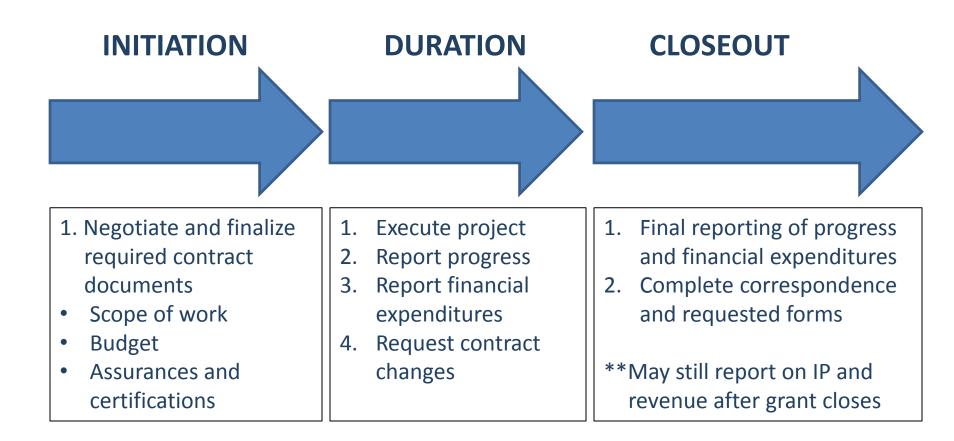
- Overview of award lifecycle and associated roles and documents
- Overview of CGMS
- CGMS steps
 - Contract initiation
 - Financial and progress reporting
- Q&A Session



Key Functions of CGMS

- Store and manage grants records
- Report programmatic and financial progress
- Manage changes to grants
- Facilitate communications about grants

Grant Phases





User Roles — CPRIT

Grants Manager Programmatic aspects of grant **Contracts Manager Contractual aspects of grant Financial Officer Financial aspects of grant**



User Roles — Grantees

• **PI/PD/CR** — program-specific

 Responsible for programmatic aspects of project and day-to-day management

- **ASO** Authorized Signing Official
 - Authority to act on organization's behalf
 - Signature indicates organization's agreement to assume obligations of award

****These roles are required in CGMS**



User Roles — Grantees

 Grants Contract/Office of Sponsored Program Official (GC/OSPO)

– Manages grant after award is made

Co-PI/Co-PD/Co-CR

Assists the PI/PD/CR on the grant

Alternate ASO

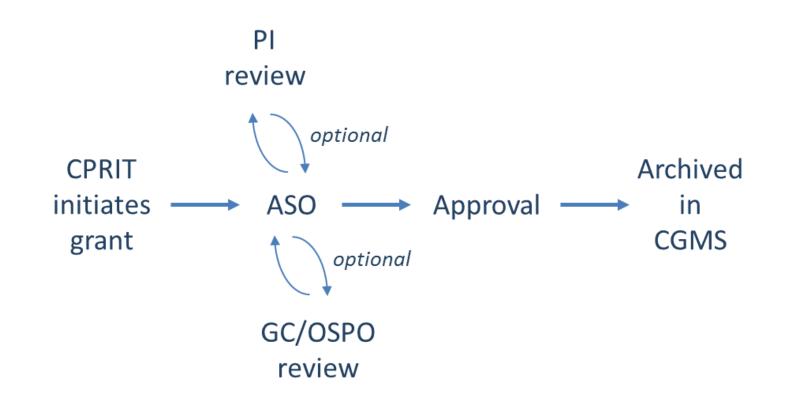
Acts on behalf of ASO

****These roles are optional in CGMS**



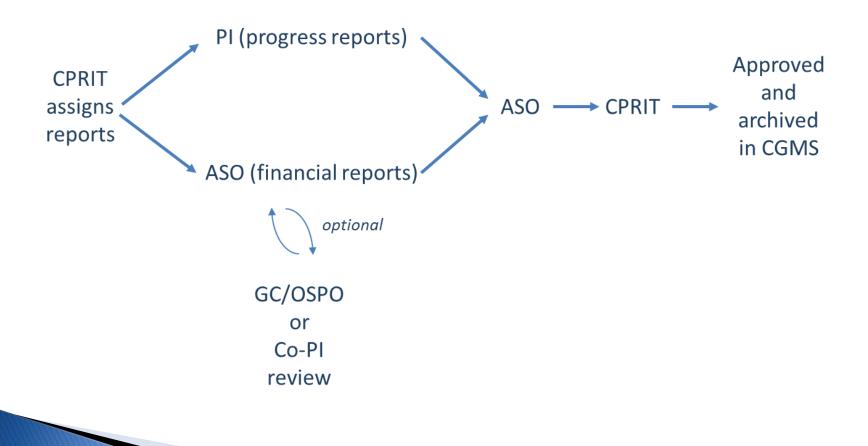
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Workflow for Initiation Stage





Workflow for Duration Stage





Contract Initiation Documents

- Base contract
- Attachment A: Approved scope of work
- Attachment B: Approved budget
- Attachment C1: Assurances and certifications
- Attachment C2: Match certification



Contract Initiation Documents

- Attachment D: IP/revenue sharing
- Attachment E: Reporting requirements
- Attachment F: Contract addendum (approved amendments)
- Duplication of Effort and Project Overlap Form



Contract Duration Documents

- Quarterly Financial Status Reports (FSR)
- Progress reports (quarterly, annual, final)
- Annual inventory report form
- HUB form
- Single audit determination form
- Change requests



Closeout and Post-Closeout Documents

- Final FSR
- Final progress reports
- Final annual inventory report
- Final HUB report
- IP report form may submit after closeout
- Revenue sharing form may submit after closeout



Key Features of CGMS

- Integration with CPRIT Application Receipt System (CARS)
- To Do list
- Follow status of action items
- Repository of documents and correspondence
- Complete actions through radio buttons
- Complete actions through web forms (enter information in text boxes)
- Password approval-based



Integration with CARS





To Do List

1		9 total records		
Start Date 🔺	Grant ID	Required Action	Task	Due Date
8 Aug 2012	<u>RP130000</u>	Complete Web Form	Negotiate Budget	12 Oct 2012
8 Aug 2012	<u>RP130000</u>	Complete Web Form	Negotiate Personnel Level of Effort	12 Oct 2012
8 Aug 2012	<u>RP130000</u>	Verify Information	Research Contract Attachment A	12 Oct 2012
3 Aug 2012	<u>RP130000</u>	Verify Information	Research Contract Base	12 Oct 2012
3 Aug 2012	<u>RP130000</u>	Verify Information	Research Contract Attachment C Part 1	12 Oct 2012
3 Aug 2012	<u>RP130000</u>	Complete Web Form	Matching Compliance Certification (Research Contract Attachment C Part 2)	12 Oct 2012
3 Aug 2012	<u>RP130000</u>	Verify Information	Research Contract Attachment D	12 Oct 2012
3 Aug 2012	<u>RP130000</u>	Verify Information	Research Contract Attachment E	12 Oct 2012
3 Aug 2012	RP130000	Complete Web Form	Duplication of Effort and Project Overlap Form	12 Oct 2012



Status of Action Items

Documents & Forms

Assigned Documents & Forms

<< first < prev 1 next > last >> 3 total records

Title 🔺	Description	Assignee	Туре	Confidential	Template	Due Date	Status	Commands
Research Contract Attachment C Part 2	Matching Compliance Certification	Doe, Jane	Contract Document	No		12 Oct 2012	Complete Web Form	<u>Start</u>
Research Contract Attachment D	Intellectual Property and Revenue Sharing	Doe, John	Contract Document	No		12 Oct 2012	Verify Information	<u>View</u>
Research Contract Attachment E	Reporting Requirements	Doe, John	Contract Document	No		12 Oct 2012	Verify Information	<u>View</u>

<< first < prev 1 next > last >> 3 total records

Completed Documents & Forms

<< first < prev 1 next > last >> 1 total records

Title 🔺	Description	Туре	Confidential	Template	Due Date	Status	Commands
Duplication of Effort and Project Overlap Form	Web form requesting information on Duplication of Efforts and Project Overlaps.	Assigned Web Form	No		12 Oct 2012	Approved	<u>View</u>
<< first < prev 1 n	ext > last >> 1 total records						



Repository

<< first < prev 1 next > last >> 6 total records

Grant ID	Grant Title 🔺	PI Name	Status	Program	Award Mechanism	FY	Cycle
<u>CP120000</u>	Test COMM for CGMS training guide	Doe, Jane	Active	Commercialization Programs	Company Relocation Awards	2012	1
<u>CP130000</u>	Test Grant (COMM) for CGMS Training	Doe, Jane	Active	Commercialization Programs	Company Formation Awards	2013	1
RP130000	Test Grant 1 for CGMS Training	Doe, Jane	In Early Termination	Research Programs	Individual Investigator Research Awards	2013	1
RP120000	test HIHR	Doe, Jane	Active	Research Programs	High-Impact/High-Risk Research Awards	2012	1
PP100000	test PREV	Doe, Jane	Active	Prevention Programs	Evidence-Based Cancer Prevention Services	2010	1
PP130000	Test Prevention Grant for CGMS Training	Doe, Jane	Early Termination	Prevention Programs	Evidence-Based Cancer Prevention Services	2013	1



Radio Buttons

Grant Information Documents & Contacts Documents & Forms Budget & Correspondence Progress Status Reports
Back to Documents
Research Contract Attachment D
To review the Contract Document, please click the following link: Research Contract Attachment D.
Verify Information Please verify that the information provided is correct by entering your password as an electronic signature and selecting the "Verified as Accurate (provide password)" option.
● Verified as Accurate (provide password) 🔿 Verified as Accurate (provide password) and Add Review Step 💿 Delegate this Task
Choose the recipient of the next action item for this document. Doe, John ASO 💌
Provide Password for Approval: Submit
No notes available.



Complete Web Form

Commands	Senior	/Key Person and	Other Personnel	Level of Effort	Year 1	Year	Year	Year	Year	All fields are require Total Person Months Per
Commanus	First Name	Last Name	Role on Project	(LOE)	Tear I	2	3	4	5	Person
				Type Appt. (months)	12	N/A	N/A	N/A	N/A	
	Jane	Doe	PI	Effort on Project	50 %	N/A	N/A	N/A	N/A	
				Person Months	6.00	N/A	N/A	N/A	N/A	6.0
				Type Appt. (months)	12	N/A	N/A	N/A	N/A	
Remove Row	George	Washington	co-PI	Effort on Project	20%	N/A	N/A	N/A	N/A	
						N/A	N/A	N/A	N/A	2.4
			o add another new row (after filling in the new row above), click "Save as Draft and Continue diting" below, then click the "Submit" button					DV/A	1WA	2.4
	row (after filling in the click the "Submit" but		ck "Save as Draft and Continue If no changes were made, plea Test	Person Months Total Person Months Per Year	2.40 8.40 made."	0.00	0.00	0.00	0.00	8.4
			If no changes were made, plea	Total Person Months Per Year	8.40					8.4
* Provide Justific mit) complete Web I	ation for Change:		If no changes were made, plea	Total Person Months Per Year	8.40					8.4
* Provide Justific nit) complete Web I	ation for Change: Form on for all required fields		If no changes were made, plea	Total Person Months Per Year	8.40 made."					8.4



Password Approval

Verify Information

Please verify that the information provided is correct by entering your password as an electronic signature and selecting the "Verified as Accurate (provide password)" option.

🔘 Go Back and Change 🛛 💿 Verified as Accurate (provide password) 💫 Verified as Accurate (provide password) and Add Review Step

Choose the recipient of the next action item for this document. Doe, John ASO ⊻

Provide Password for Approval:

No notes available.

CPR

Overview of CGMS

- 3 main sections on home page (all grants)
 - My Correspondence
 - To Do List
 - My Grants
- Tab-by-tab view of 7 tabs on Grants page (individual grant)

Actions for lifecycle of individual grant



CGMS Home Page

	н		g Opportunities Fee Jence & Notifications			
			Hor	me	Logged in as: JohnDASO (John Doe) [<u>not Joh</u>	nnDA SC
To Do List					Correspondence Inb	0) <u>xox</u>
	next > last >>	9 total records				
Start Date	 Grant ID 	Required Action		Task		
28 Aug 2012	RP130000	Complete Web Form	Negotiate Budget			12 0
28 Aug 2012	RP130000	Complete Web Form	Negotiate Personnel Leve	el of Effort		12 0
28 Aug 2012	RP130000	Verify Information	Research Contract Attac	hment A		12 C
28 Aug 2012	RP130000	Verify Information	Research Contract Base	1		12 C
		Verify Information	Research Contract Attac	hment C Part 1		12 0
28 Aug 2012	RP130000	verity information				
	RP130000 RP130000	Complete Web Form	Matching Compliance Ce	ertification (Research Contract Att	achment C Part 2)	12 0
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My Correspondence

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Corresponder My Corres << first < prev	pondence 1 next > last >>		Topic	Subject	Commands				
Corresponder	pondence	 1 total records Importance not urgent 	Topic Question	Subject test correspondence	Commands View Thread Reply				



To Do List Section

			g Opportunities Fee lence & Notifications			
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Start Date	▲ Grant ID	Required Action		Task		
28 Aug 2012	RP130000	Complete Web Form	Negotiate Budget			12
28 Aug 2012	RP130000	Complete Web Form	Negotiate Personnel Leve	el of Effort		12
28 Aug 2012	RP130000	Verify Information	Research Contract Attac	chment A		12
	RP130000	Verify Information	Research Contract Base	±		12
28 Aug 2012		M 15 1 5 2	Research Contract Attac	chment C Part 1		12
28 Aug 2012 28 Aug 2012	RP130000	Verify Information	resourch contract / atac			
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To Do List

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Start Date 🔺	Grant ID	Required Action	Task	Due Date
28 Aug 2012	<u>RP130000</u>	Complete Web Form	Negotiate Budget	12 Oct 2012
28 Aug 2012	<u>RP130000</u>	Complete Web Form	Negotiate Personnel Level of Effort	12 Oct 2012
28 Aug 2012	<u>RP130000</u>	Verify Information	Research Contract Attachment A	12 Oct 2012
28 Aug 2012	<u>RP130000</u>	Verify Information	Research Contract Base	12 Oct 2012
28 Aug 2012	<u>RP130000</u>	Verify Information	Research Contract Attachment C Part 1	12 Oct 2012
28 Aug 2012	<u>RP130000</u>	Complete Web Form	Matching Compliance Certification (Research Contract Attachment C Part 2)	12 Oct 2012
28 Aug 2012	<u>RP130000</u>	Verify Information	Research Contract Attachment D	12 Oct 2012
28 Aug 2012	<u>RP130000</u>	Verify Information	Research Contract Attachment E	12 Oct 2012
28 Aug 2012	RP130000	Complete Web Form	Duplication of Effort and Project Overlap Form	12 Oct 2012



Example of Complete Web Form Action

Grant Information Contacts Forms	Budget & Financial Status Reports Reports				
Back to Documents					
	Duplication of Effort and Project Overlap Form				
To avoid duplicate payments for the same work please advise CPRIT by indicating below if you have received other grant funding for some or all of the cancer research/prevention services that a subject of this award subsequent to submitting the application to the Institute.					
* Please select one of the following:	I have received other grant funding for ALL not otherwise previously disclosed in my CPRIT grant application ID RP130000 to support some or all of the research/prevention services that are the subject of the CPRIT award. I have revised my budget request accordingly to reflect the changes to award amount to avoid duplicate payments.				
	I have received other grant funding for SOME not otherwise previously disclosed in my CPRIT grant application ID RP130000 to support some or all of the research/prevention services that are the subject of the CPRIT award. I have revised my budget request accordingly to reflect the changes to award amount to avoid duplicate payments.				
	I have NOT received other grant funding to support some or all of the research/prevention services that are the subject of the CPRIT award not otherwise disclosed in my CPRIT application ID RP130000.				
By submitting this document to CPRIT's electronic grants mana- contained herein is correct and should be relied upon by CPRIT	gement system and submitting it for CPRIT approval, the primary investigator/project director for the project certifies that the information in executing the final award contract.				
Complete Web Form Please provide information for all required fields.					
○ Save as Draft and Continue Editing ○ Save as Draft	and Close Verify Before Submit Delegate this Task				
Choose the recipient of the next action item for this docume	nt. Doe, John ASO 💌				
Submit No notes available.					



Verification of Complete Web Form Action

Verify Information Please verify that the information provided is correct by entering your password as an electronic signature and selecting the "Verified as Accurate (provide password)" option	e
◯ Go Back and Change 💿 Verified as Accurate (provide password) ◯ Verified as Accurate (provide password) and Add Review Step	
Choose the recipient of the next action item for this document. Doe, John ASO 💌 Provide Password for Approval: Submit	
No notes available.	



Example of Verify Information Action

Grant Information Contacts Documents & Forms Budget & Correspondence Progress Status Reports
Back to Documents
Research Contract Attachment D
To review the Contract Document, please click the following link: Research Contract Attachment D.
Verify Information Please verify that the information provided is correct by entering your password as an electronic signature and selecting the "Verified as Accurate (provide password)" option.
O Verified as Accurate (provide password) ○ Verified as Accurate (provide password) and Add Review Step ○ Delegate this Task
Choose the recipient of the next action item for this document. Doe, John ASO 💌
Provide Password for Approval: Submit
No notes available.



Approval of a "Verify Information" Action

rovide Justification for Disapproval	ai	
e Password for Approval:		



My Grants Section

	_	ome Grants Correspond				
					Logged in as: JohnDASO (John Doe) [not John	nDASO cl
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To Do List						
<< first < prev 1	next > last >>	9 total records				
Start Date	Grant ID	Required Action		Task		Due
28 Aug 2012	RP130000	Complete Web Form	Negotiate Budget			12 Oct 2
28 Aug 2012	RP130000	Complete Web Form	Negotiate Personnel Level	of Effort		12 Oct 2
28 Aug 2012 28 Aug 2012	RP130000 RP130000	Complete Web Form Verify Information	Negotiate Personnel Level Research Contract Attach			12 Oct 2 12 Oct 2
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28 Aug 2012	RP130000	Verify Information	Research Contract Attach	ment A		12 Oct 2
28 Aug 2012 28 Aug 2012	RP130000 RP130000	Verify Information	Research Contract Attach Research Contract Base Research Contract Attach	ment A	ment C Part 2)	12 Oct 2 12 Oct 2
28 Aug 2012 28 Aug 2012 28 Aug 2012 28 Aug 2012	RP130000 RP130000 RP130000	Verify Information Verify Information Verify Information	Research Contract Attach Research Contract Base Research Contract Attach	ment A ment C Part 1 tification (Research Contract Attachr	ment C Part 2)	12 Oct 2 12 Oct 2 12 Oct 2
28 Aug 2012 28 Aug 2012 28 Aug 2012 28 Aug 2012 28 Aug 2012	RP130000 RP130000 RP130000 RP130000 RP130000	Verify Information Verify Information Verify Information Complete Web Form	Research Contract Attach Research Contract Base Research Contract Attach Matching Compliance Cer	ment A ment C Part 1 tification (Research Contract Attachr ment D	ment C Part 2)	12 Oct 2 12 Oct 2 12 Oct 2 12 Oct 2



Search for Grants

Profile My App	ications My Grants Current Funding Opportunities Feedback	
	Home Grants Correspondence & Notifications	
		Logged in as: JohnDASO (John Doe) [<u>not JohnDASO click </u> My Grants > Grants > Search for Grar
		my Grants > Grants > Search for Gran
	Search for Grants	
Filter Options		
Program Program:	×	
Fiscal Year:		
Award Mechanism:		
Cycle:		
PI/PD/CR		
PI/PD/CR Last Name		
Grant		
Grant ID:		
Project Title: Organization:		
Grant Status:		
Grant Gratus.	In Negotiation	
	Active In Early Termination	
	Early Termination	
Contract Start Date:		
Contract End Date:	From: To:	
	Reset Search Grants	



My Grants

Grant ID	Grant Title 🔺	PI Name	Status	Program	Award Mechanism	FY	Cycle
CP120000	Test COMM for CGMS training guide	Doe, Jane	Active	Commercialization Programs	Company Relocation Awards	2012	1
<u>CP130000</u>	Test Grant (COMM) for CGMS Training	Doe, Jane	Active	Commercialization Programs	Company Formation Awards	2013	1
RP130000	Test Grant 1 for CGMS Training	Doe, Jane	In Early Termination	Research Programs	Individual Investigator Research Awards	2013	1
RP120000	test HIHR	Doe, Jane	Active	Research Programs	High-Impact/High-Risk Research Awards	2012	1
PP100000	test PREV	Doe, Jane	Active	Prevention Programs	Evidence-Based Cancer Prevention Services	2010	1
<u>PP130000</u>	Test Prevention Grant for CGMS Training	Doe, Jane	Early Termination	Prevention Programs	Evidence-Based Cancer Prevention Services	2013	1



Grants Display





Grant Information

My Profile My Applica	tions My Grants Current Funding Opportunities Feedback
	Home Grants Correspondence & Notifications
	Logged in as: JaneDPI (Jane Doe) [<u>not JaneDPI click here</u>] My Grants > Grant Information
	Grant Information
	Orand Dr. DD420000
	Grant ID: RP130000 Grant Title: Test Grant 1 for CGMS Training PI/PD/CR: Jane Doe Organization: XYZ University (Primary)
	Budget &
Grant Information Conta	acts Documents & Budget & Progress Financial Status Reports Reports
Grant Information Contract Start Date:	12 Oct 2012 Contract End Date: 11 Oct 2015
Grant Status:	
	Test Grant 1 for CGMS Training
	Grant Links
Associated Grants:	
Application Links:	
	Grant Tags
Tags:	



Contacts

PI/PD/CR: Jane Doe Budget & Financial Status Reports Grant Contacts Budget & Financial Status Reports Progress Il Grant Contacts equest Change in Contacts rant Contacts rant Contacts rant Contacts first < prev 1 next > last >> 3 total records Principal Investigator/Program Director/CR - Company Representative Principal Investigator/Program Director/CR - Company Representative Doe, first < prev 1 next > last >> 3 total records IL CPRIT Staff Contacts	Grant 1 for CGMS Training Jniversity (Primary) Change Requests
PI/PD/CR: Jane Doe Budget & Financial Status Reports Grant Contacts Budget & Financial Status Reports Progress Il Grant Contacts equest Change in Contacts rant Contacts rant Contacts rant Contacts first < prev 1 next > last >> 3 total records Principal Investigator/Program Director/CR - Company Representative Principal Investigator/Program Director/CR - Company Representative Doe, first < prev 1 next > last >> 3 total records IL CPRIT Staff Contacts	Jniversity (Primary) Change Requests
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Principal Investigator/Program Director/CR - Company Representative Doe, first < prev	, John <u>View Details</u> <u>Replace</u>
first < prev 1 next > last >> 3 total records	, Mary View Details Replace
II CPRIT Staff Contacts	, Jane View Details Request to Replace
	Add Grant Contact Role
PRIT Staff Contacts	
<pre>first < prev 1 next > last >> 3 total records</pre>	
Role • Name	Commands
Contract Manager Ross, Betsy	Commanus
Financial Officer Edison, Thomas	View Details
Grants Manager Franklin, Ben	



Documents & Forms

Documents & Forms

Assigned Documents & Forms

<< first < prev 1 next > last >> 3 total records

Title	•	Description	Assignee	Туре	Confidential	Template	Due Date	Status	Commands
Research Contract Attachment C Part 2		Matching Compliance Certification	Doe, Jane	Contract Document	No		12 Oct 2012	Complete Web Form	<u>Start</u>
Research Contract Attachment D		Intellectual Property and Revenue Sharing	Doe, John	Contract Document	No		12 Oct 2012	Verify Information	View
Research Contract Attachment E		Reporting Requirements	Doe, John	Contract Document	No		12 Oct 2012	Verify Information	View

<< first < prev 1 next > last >> 3 total records

Completed Documents & Forms

<< first < prev 1 next > last >> 1 total records

Title 🔺	Description	Туре	Confidential	Template	Due Date	Status	Commands
Duplication of Effort and Project Overlap Form	Web form requesting information on Duplication of Efforts and Project Overlaps.	Assigned Web Form	No		12 Oct 2012	Approved	<u>View</u>

<< first < prev 1 next > last >> 1 total records

Completed Contract Documents

<< first < prev 1 next > last >> 4 total records

Title *	Description	Status	Commands
Contract Attachment B	Verification Request of Contract Document	Approved	View Version History
Research Contract Attachment A	Contract Document Review	Approved	View Version History
Research Contract Attachment C Part 1	Assurances and Certifications	Approved	View Version History
Research Contract Base	Research Contract Base	Approved	View Version History

<< first < prev 1 next > last >> 4 total records

Ad Hoc Documents

<< first < prev next > last >> 0 total records

Title 🔺	Last Updated	Commands
No records found.		

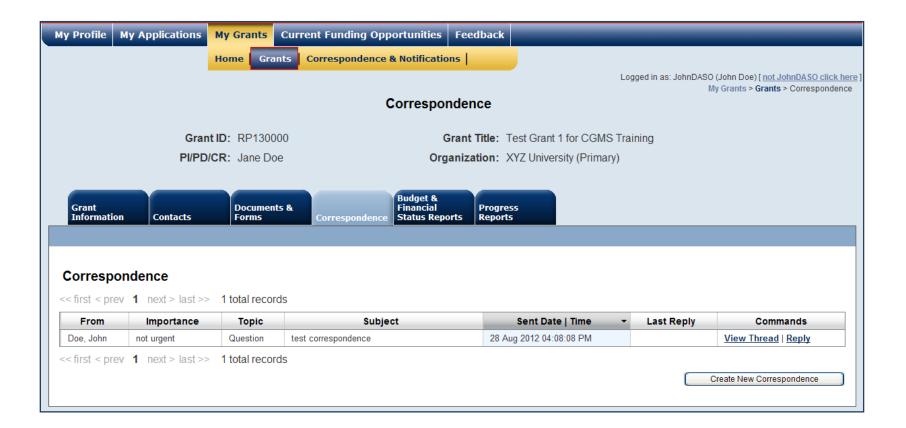


Documents & Forms

Ad Hoc Documents		
<< first < prev next > last >> 0 total records		
Title	Last Updated	Commands
No records found.		
<< first < prev next > last >> 0 total records		
	Start IP Report Form	t Revenue Sharing Form Upload Ad Hoc Document



Correspondence





New Correspondence

	CANCER PREVENTION & SEARCH INSTITUTE OF TEXAS Send Correspondence	Home Help Desk Guide FAQ Log Out
My Profile My Application G PV Grant Information Contacts	* Importance: O urgent O not urgent From: Doe, John * Subject:	as: JohnDASO (John Doe) [<u>not JohnDASO click here</u> My Grants > Grants > Correspondence
Correspondence << first < prev 1 next > last From Importance Doe, John not urgent << first < prev 1 next > last	body Cancel Send Correspondence	t Reply Commands View Thread Reply Create New Correspondence

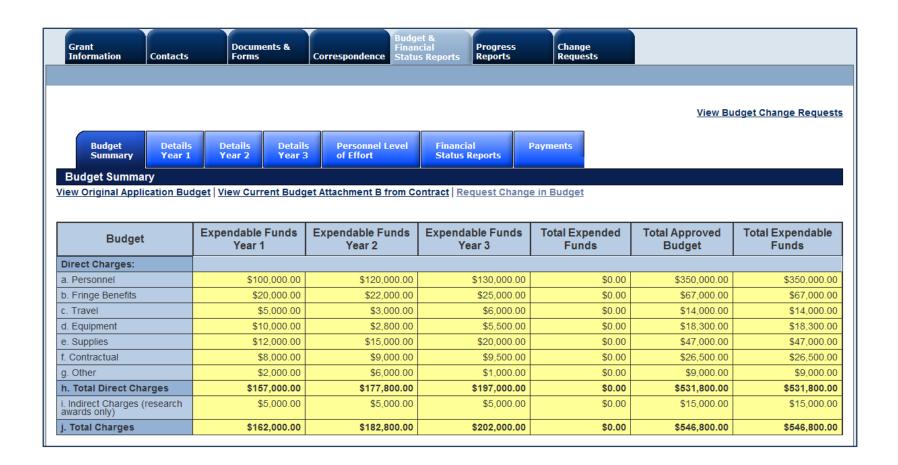


Budget & FSR





Budget Summary Display





Details Year 1 Display

								View Budget	Change Reques		
Budget Summary	Details Year 1		etails Pers ear 3 of Ef	onnel Level fort	Financial Status Report	Paymen	ts				
Details Year 1		·									
Budget & Expendable Funds Expended Funds											
	Year 1 Approved Budget	Carry Forward from Previous Year	Year 1 Expendable Funds	Year 1 Quarter 1 Expended Funds	Year 1 Quarter 2 Expended Funds	Year 1 Quarter 3 Expended Funds	Year 1 Quarter 4 Expended Funds	Year 1 Expended Funds All Quarters (% of total year 1 expended and expendable funds)	Year 1 Remaining Expendable Funds		
Direct Charges:											
a. Personnel	\$100,000.00	N/A	\$100,000.00	N/A	N/A	N/A	N/A	\$0.00 (0%)	\$100,000.0		
b. Fringe Benefits	\$20,000.00	N/A	\$20,000.00	N/A	N/A	N/A	N/A	\$0.00 (0%)	\$20,000.0		
c. Travel	\$5,000.00	N/A	\$5,000.00	N/A	N/A	N/A	N/A	\$0.00 (0%)	\$5,000.0		
d. Equipment	\$10,000.00	N/A	\$10,000.00	N/A	N/A	N/A	N/A	\$0.00 (0%)	\$10,000.0		
e. Supplies	\$12,000.00	N/A	\$12,000.00	N/A	N/A	N/A	N/A	\$0.00 (0%)	\$12,000.0		
f. Contractual	\$8,000.00	N/A	\$8,000.00	N/A	N/A	N/A	N/A	\$0.00 (0%)	\$8,000.0		
g. Other	\$2,000.00	N/A	\$2,000.00	N/A	N/A	N/A	N/A	\$0.00 (0%)	\$2,000.0		
h. Total Direct Charges	\$157,000.00	N/A	\$157,000.00	N/A	N/A	N/A	N/A	\$0.00 (0%)	\$157,000.0		
i. Indirect Charges (research awards only)	\$5,000.00	N/A	\$5,000.00	N/A	N/A	N/A	N/A	\$0.00 (0%)	\$5,000.0		
. Total Charges	\$162,000.00	N/A	\$162,000.00	N/A	N/A	N/A	N/A	\$0.00 (0%)	\$162,000.0		



PLOE Display

			etails Personnel Level ear 3 of Effort	Financial Status Reports		Payments							
Personnel	Personnel Level of Effort												
Request Char	equest Change of Personnel Level of Effort												
Senior/Ke	y Person and	Other Personnel	Level of Effort (LOE)	Year 1	Year 2	Year 3	Year 4	Year 5	Total Person Months Per Person				
First Name	Last Name	Role on Project		Tourr	Tour 2			Tear o					
			Type Appt. (months)	12	12	12	N/A	N/A					
Clara	a Barton	Research Assistant	Effort on Project	100%	100%	100%	N/A	N/A					
			Person Months	12.00	12.00	12.00	N/A	N/A	36.00				
			Type Appt. (months)	12	12	12	N/A	N/A					
Jane	Doe	PI	Effort on Project	50%	50%	50%	N/A	N/A					
			Person Months	6.00	6.00	6.00	N/A	N/A	18.00				
			Type Appt. (months)	9	9	9	N/A	N/A					
George Washington		Co-Pl	Effort on Project	30%	30%	30%	N/A	N/A					
	P		Person Months	2.70	2.70	2.70	N/A	N/A	8.10				
			Total Person Months Per Yea	r 20.70	20.70	20.70	N/A	N/A	62.10				



FSR Display

	Budget Summary	Details Year 1		etails Personnel Lev ear 3 of Effort	el Financial Status Repor	Payments				
Finar	inancial Status Reports									
			ered by FSR port	Summary of G	Contents					
Year	Quarter	Start	End	Project Cost This Period	Remaining Budget Balance (all years)	Date FSR Created	Date FSR Approved	Current Status	Commands	
Y1	Q1	12 Oct 2012	30 Nov 2012	\$0.00	\$546,800.00	30 Aug 2012		Complete Web Form	Edit FSR	
Total:										



Payments Display

Budget Summary			Petails Personne 'ear 3 of Effort		Financial Status Reports	Payments				
Payments										
Request Advanc	Request Advancement of Funds									
Transaction Type	Advanced Funds Balance Before Transaction	Expended Funds	Payment Due (Expended Funds Minus Current Advance Balance)	Amount Of Payment	Advance Funds Balance After Transaction	Date Payment Authorized *	Date Payment Made	Payment Type	Payment ID	Commands
No Payments	No Payments									

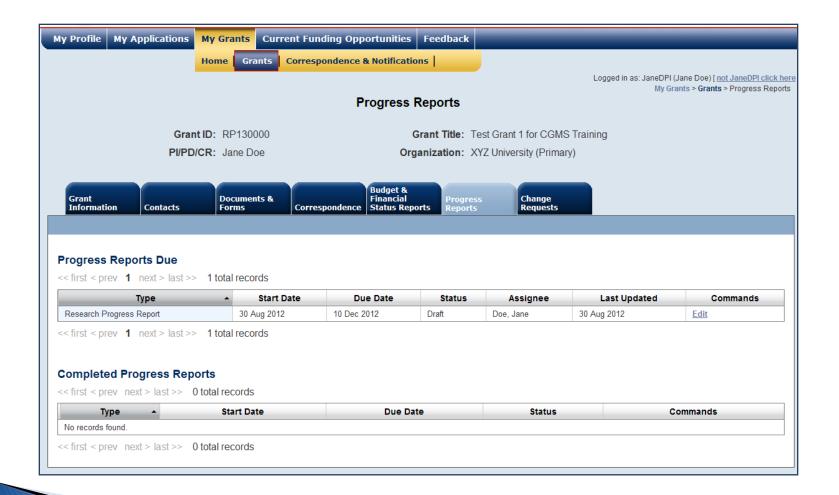


FSR Form

<th bits="" bits<="" colspace="" th=""><th>CANCER PRE</th><th colspan="10">CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS FINANCIAL STATUS REPORT Form 269A</th></th>	<th>CANCER PRE</th> <th colspan="10">CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS FINANCIAL STATUS REPORT Form 269A</th>	CANCER PRE	CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS FINANCIAL STATUS REPORT Form 269A									
Project Title: Test Grant 1 for CGMS Training Payee Name: Contract Term (Month / Day / Year): Address: Contract Term (Month / Day / Year): Address: From: 10/12/12 To: 10/11/12 Citly, State, ZIP: Period Covered Its Report Start: End: Payee Vendor ID No: (III, DAP PROVED (III, DAP ROVED (IIII, DAP ROVED (IIII, DAP ROVED (IIIII, DAP ROVED (IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII					512-475-2563							
Page Name: Contract Term (Mont/ Play / Year): From: 10/12/12 To: 10/11/15 City, State, ZIP: Period Coverety: From: 10/12/12 To: 10/11/15 Pagee Vendor ID No: Star: End: Final Report? O'Yes' O'No 10/12/12 11/30/12 (i) BUDGET CATEGORIES (ii) APPROVED BUDGET BUDGET (iii) PROJECT COSTS (iv) CUMULATVE PROJECT COSTS (v) REMAINING BUDGET BALANCE (ii minus iv) a. Personnel \$350,000.00 \$0.00 \$0.00 \$350,000.00 b. Fringe Benefits \$67,000.00 \$0.00 \$0.00 \$360,000.00 c. Travel \$14,000.00 \$0.00 \$0.00 \$14,000.00 c. Cartactual \$26,500.00 \$0.00 \$0.00 \$47,000.00 g. Other \$9,000.00 \$0.00 \$0.00 \$47,000.00 g. Other \$9,000.00 \$0.00 \$0.00 \$53,800.00 g. Other \$9,000.00 \$0.00 \$0.00 \$53,800.00 g. Other \$9,000.00 \$0.00 \$53,800.00 \$53,800.00 g. Other \$9,000.00 \$0.00	Contractor Name:			CPRIT Project No.:	RP130000							
Address Contract Term (Mont/ Year): From: 10/12/12 To: 10/11/15 City, State, ZIP: From: 10/12/12 To: 10/11/15 Payee Vendor ID No. Start: End: Time Report O'Yes O'No 10/12/12 11/30/12 (i) BUDGET CATEGORIES (ii) APPROVED BUDGET (iii.) PROJECT COSTS (iv.) CUMULATIVE BUDGET N. (i) BUDGET CATEGORIES (iii.) APPROVED BUDGET (iv.) CUMULATIVE PROJECT COSTS N. REMAINING BUDGET BUDGET (i) BUDGET CATEGORIES (iii.) APPROVED BUDGET (iv.) CUMULATIVE PROJECT COSTS N. REMAINING BUDGET BUDGET (i) BUDGET CATEGORIES \$\$350,000.00 \$\$0.00 \$\$0.00 \$\$350,000.00 (i) Finge Benefits \$\$47,000.00 \$\$0.00 \$\$0.00 \$\$14,000.00 (i Equipment \$\$14,000.00 \$\$0.00 \$\$14,000.00 \$\$47,000.00 \$\$14,000.00 (i Equipment \$\$14,000.00 \$\$0.00 \$\$0.00 \$\$14,000.00 \$\$47,000.00 (i Contractual \$\$47,000.00 \$\$0.00 \$\$0.00 \$\$0.00 \$\$14,000.00 (i Lonitract Charges (research avards only)	Project Title:	Project Title: Test Grant 1 for CGMS Training										
Prom: 10/12/12To: 10/11/15Prom: 10/12/12To: 10/11/15Period CovertTo: 10/11/15Period CovertTo: 10/11/15Period CovertThis ReportStart:End:End: Start:End: St	Payee Name:											
Payee Vendor ID No: Start: End: I (1) Final Report? Yes ⊙ No 10/12/12 11/30/12 (i) BUGET CATEGORIES (ii) APPROVED BUGET (iii) PROJECT COSTS THIS PERIOD (iv.) CUMULATIVE PROJECT COSTS REMAINING BUGET a. Personnel \$350,000.00 \$14,000.00 \$0.00 \$14,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$47,000.00 \$0.00 \$46,800.00 \$0.00 \$51,000.00	Address:											
Final Report?○ Yes ⊙ No10/12/1211/30/12(i,) BUDGET CATEGORIES(ii,) APPROVED BUDGET(iii,) PROJECT COSTS THIS PERIOD(iv,) CUMULATIVE BALANCE (ii minus iv)a. Personnel\$350,000.00\$0.00\$0.00\$350,000.00b. Fringe Benefits\$350,000.00\$0.00\$0.00\$350,000.00c. Travel\$14,000.00\$0.00\$0.00\$14,000.00c. Travel\$14,000.00\$0.00\$0.00\$14,000.00e. Supplies\$47,000.00\$0.00\$0.00\$18,300.00g. Other\$9,000.00\$0.00\$0.00\$26,500.00g. Other\$9,000.00\$0.00\$0.00\$9,000.00h. Total Direct Charges\$531,800.00\$0.00\$0.00g. Other\$546,800.00\$0.00\$0.00\$515,000.00j. Total Charges\$546,800.00\$0.00\$0.00\$50.00j. Total Charges\$546,800.00\$0.00\$0.00\$0.00k. Program Income ExpendedDe_JohnTelephone No.Telephone No.CERTIFICATION: I certify to the bestTelephone No.Yei ProzeSignature of Autorized Certify officiat:Telephone No.Fax No.Signature of Autorized Certify officiat:Telephone No.Fax No.Typed or Printed Name and Tite of E:Fax Ro.Fax No.12a. Prior Years Program IncomeFurthing Officiat:Fax Ro.13b. State Autorized Certify officiat:Fax Ro.Fax No.14b. State Autorized Certify officiat:Fax Ro.Fax	City, State, ZIP:			Period Covered	by this Report							
(i) BUDGET CATEGORIES(ii) APPROVED BUDGET(iii) PROJECT COSTS THIS PERIOD(iv) CUMULATIVE PROJECT COSTS BUDGET BUDGET BUDGET BUDGET BLANCE (ii minus iv)a. Personnel\$350,000.00\$0.00\$0.00\$0.00\$350,000.00b. Fringe Benefits\$67,000.00\$0.00\$0.00\$0.00\$350,000.00c. Travel\$14,000.00\$0.00\$0.00\$14,000.00c. Travel\$14,000.00\$0.00\$0.00\$14,000.00d. Equipment\$18,300.00\$0.00\$0.00\$14,000.00e. Supplies\$47,000.00\$0.00\$0.00\$47,000.00f. Contractual\$26,500.00\$0.00\$0.00\$26,500.00g. Other\$9,000.00\$0.00\$0.00\$531,800.00h. Total Direct Charges\$531,800.00\$0.00\$50.00i. Indirect Charges (research awards only)\$15,000.00\$0.00\$50.00j. Total Charges\$546,800.00\$0.00\$0.00\$50.00k. Program Income ExpendedDe, John\\I. Indirect Charges (research awards only)Do.Telephone No:\j. Total ChargesDo.\$546,800.00\$0.00\$0.00\$0.00k. Program Income ExpendedDo.Telephone No:\signature of Authorized Certify to the best-tractory to the purposes to trich this reported and unificiated obligations to forth in the award to trick and unificiated obligations to forth purposes to trick and unificiated obligations to forth purposes to trick and unificiated obligations to forth purposes to	Payee Vendor ID No.:			Start:	End:							
(i) BUDGET CATEGORIES(ii) APPROVED BUDGET(iii) RODECT PROJECT COSTS THIS PERIODFBUDGET BRUDKET (ii minus iv)a. Personnel\$\$350,000.00\$0.00\$0.00\$\$0.00b. Fringe Benefits\$\$67,000.00\$0.00\$\$0.00\$\$0.00c. Travel\$\$14,000.00\$\$0.00\$\$0.00\$\$14,000.00c. Travel\$\$14,000.00\$\$0.00\$\$0.00\$\$14,000.00d. Equipment\$\$18,300.00\$\$0.00\$\$0.00\$\$18,300.00e. Supplies\$\$47,000.00\$\$0.00\$\$0.00\$\$47,000.00f. Contractual\$\$47,000.00\$\$0.00\$\$0.00\$\$47,000.00g. Other\$\$9,000.00\$\$0.00\$\$0.00\$\$26,500.00g. Other\$\$9,000.00\$\$0.00\$\$0.00\$\$53,180.00h. Total Direct Charges\$\$53,180.00\$\$0.00\$\$53,180.00i. Indirect Charges (research awards only)\$\$15,000.00\$\$0.00\$\$546,800.00j. Total Charges\$\$546,800.00\$\$0.00\$\$0.00\$\$0.00k. Program Income Expended\$\$0.01\$\$15,000.00\$\$0.00l. Indirect Charges (research awards only)\$\$0.01\$\$15,000.00\$\$0.00k. Program Income Expended\$\$0.01\$\$10\$\$10l. Indirect Charges (research awards only)\$\$0.01\$\$10\$\$10i. Indirect Charges (research awards only)\$\$10\$\$10\$\$10k. Program Income Expended\$\$0.01\$\$10\$\$10J. Total Charge\$\$0.01\$\$10\$\$10\$\$10 </th <th>Final Report?</th> <th>⊙Yes ⊙No</th> <th></th> <th>10/12/12</th> <th>11/30/12</th>	Final Report?	⊙Yes ⊙No		10/12/12	11/30/12							
Index of the second			COSTS		BUDGET BALANCE (ii							
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definition 0 <th< td=""><td>b. Fringe Benefits</td><td>\$67,000.00</td><td>\$0.00</td><td>\$0.00</td><td>\$67,000.00</td></th<>	b. Fringe Benefits	\$67,000.00	\$0.00	\$0.00	\$67,000.00							
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g. Other SS,000.00 S0.00 S0.00 S9,000.00 h. Total Direct Charges S531,800.00 S0.00 S0.00 S9,000.00 h. Total Direct Charges (research awards only) S15,000.00 S0.00 S0.00 S531,800.00 j. Total Charges (research awards only) S546,800.00 S0.00 S0.00 S546,800.00 j. Total Charges S546,800.00 S0.00 S0.00 S0.00 k. Program Income Expended Doe, John N/A N/A Prepared By: Doe, John Telephone No: Image: State	e. Supplies	\$47,000.00	\$0.00	\$0.00	\$47,000.00							
h. Total Direct Charges \$531,800.00 \$0.00 \$0.00 \$531,800.00 i. Indirect Charges (research awards only) \$15,000.00 \$0.00 \$0.00 \$531,800.00 j. Total Charges (research awards only) \$15,000.00 \$0.00 \$0.00 \$15,000.00 j. Total Charges \$546,800.00 \$0.00 \$0.00 \$546,800.00 k. Program Income Expended \$0.00 \$0.00 \$0.00 l. In-Kind Contributions (prevention with only) N/A N/A N/A Prepared By: Doe, John Image: State only with on	f. Contractual	\$26,500.00	\$0.00	\$0.00	\$26,500.00							
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awards only) average	h. Total Direct Charges	\$531,800.00	\$0.00	\$0.00	\$531,800.00							
k. Program Income Expended \$0.00 \$0.00 \$0.00 L. In-Kind Contributions (prevention → wids only) N/A N/A N/A Prepared By: Doe, John Telephone No.: Image: Correct and complex only Title: ASO Telephone No.: Image: Correct and complex only CERTIFICATION: Certify to the best of my knowledge and belief that this report is correct and complex only Telephone No.: Signature of Authorized Certifying Official: Telephone No.: Telephone No.: Typed or Printed Name and Title of Certifying Official: Fax No.: Fax No.: Typed or Printed Name and Title of Certifying Official: FSR Receipt Date: S0.00 12a. Prior Years Program Income Carryover \$0.00 \$0.00		\$15,000.00	\$0.00	\$0.00	\$15,000.00							
Lin-Kind Contributions (prevention → w solv) N/A N/A Prepared By: Doe, John Telephone No.: Title: ASO Telephone No.: CERTIFICATION: 1 certify to the best of my knowledge and belief that this report is correct and completion and unliquidated obligations → e for the purposes set forth in the award correct. Telephone No.: Signature of Authorized Certifying Official: Telephone No.: Telephone No.: Typed or Printed Name and Title of Certifying Official: Telephone No.: Fax No.: 12a. Prior Years Program Income Carrover \$0.00 \$0.00	j. Total Charges	\$546,800.00	\$0.00	\$0.00	\$546,800.00							
Prepared By: Doe, John Title: ASO Telephone No.: CERTIFICATION: I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents. Signature of Authorized Certifying Official: Signature of Authorized Certifying Official: Telephone No.: Fax No.: Typed or Printed Name and Title of Certifying Official: Date Submitted: 120 12a. Prior Years Program Income Carryover \$0.00 \$0.00	k. Program Income Expended		\$0.00	\$0.00	\$0.00							
ASO Telephone No.: CERTIFICATION: I certify to the best of my knowledge and belief that this report is correct and complete and that all outdays and unliquidated obligations: are for the purposes set forth in the award documents. Signature of Authorized Certifying Official: Telephone No.: Typed or Printed Name and Title of Certifying Official: Date Submitted: 12a. Prior Years Program Income Carryover \$0.00	I. In-Kind Contributions (prevention a	wards only)	N/A	N/A	N/A							
CERTIFICATION: 1 certify to the best of my knowledge and belief that this report is correct and complete and that all outpaids and unliquidated obligations are for the purposes set forth in the award documents. Itelephone No.: Signature of Authorized Certifying Official: Telephone No.: Itelephone No.: Typed or Printed Name and Title of Certifying Official: Date Submitted: Itelephone No.: 12a. Prior Years Program Income Carryover \$0.00 \$0.00												
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Fax No.: Typed or Printed Name and Title of Certifying Official: Date Submitted: FSR Receipt Date: FSR Receipt Date: 12a. Prior Years Program Income Carryover \$0.00	outlays and unliquidated obligations	are for the purposes	belief that this report set forth in the award	d documents.	ete and that all							
Typed or Printed Name and Title of Certifying Official: Date Submitted: FSR Receipt Date: 12a. Prior Years Program Income Carryover	Signature of Authorized Certifying O	official:		· · ·								
FSR Receipt Date: \$0.00 12a. Prior Years Program Income Carryover \$0.00												
12a. Prior Years Program Income Carryover \$0.00	Typed or Printed Name and Title of 0											
	12a Drior Yoaro Drogram Income C	arpiovor		FSK Receipt Date:	50.00							
12b Current Vear Bregram Income Collected					\$0.00							
12b. Current Year Program Income Collected \$0.00 12c. Total Program Income (prior year carryover & current year collected) \$0.00			t year collected									
*Item 11k © must be equal to or greater than Item 12a by the end of the contract. () indicate with an X each category where	· · · ·		· · ·) indicate with an Y co								



Progress Reports





Progress Reports — Components (Vertical Subtabs)

Grant Information	Contacts	Documents & Forms	and the second s	Budget & Financial Status Reports	Progress Reports	Change Requests		
Annual Progre Grant Year Endim Back to Progress Major Findings Progress Summary of Goals Publications Patents Economic Impact Supporting Document Review and Submit	g 12 Oct 2013 ss Reports	project, results obtai encountered and act anticipated activities specifically to the go	nary of the progress of ined to date, problems/, ions taken, and the for the year ahead. Re als and timelines as se k (Attachment A to the	the issues fer		Font Style	* = Required	



Progress Reports — Mark as Completed

Grant Information Contacts	Documents & Budg Forms Correspondence Statu	et & Change Icial Progress Change Is Reports Requests
Annual Progress Report Grant Year Ending 15 Oct 2013 Back to Progress Reports		
		* = Required
Progress Summary of Goals for Hext Year <u>Client Stories and Quotes</u> <u>Materials Produced</u> <u>Project Information</u> Publications	* Description of Progress Against Timeline and Goals:	Text Editing Tools Font Name and Size Arial 13 2 B Insert Item See
Patents Patents Review and Submit	* Challenges and barriers encountered and strategies used to overcome:	body Text Editing Tools Font Name and Size Font Style Lists Insert Item Insert Item
	* Status:	body
	Save Section as Draft Reset	Mark as Completed



Progress Reports — Review and Submit

Grant Information Conta	Documents & Forms	Correspondence	Budget & Financial Status Reports	Progress Reports	Change Requests		
Annual Progress Re	port						
Marked as Complete	d						
Grant Year Ending 19 Oct							
Back to Progress Repo	orts						
			Rev	iew and Subm	it		
Major Findings Progress		Section		Status	Comm	ands	
ummary of Goals	Major Findings/Pro			Completed	View		
Publications	Summary of Goals			Draft	Edit		
	Publications			Draft	Edit		
ntellectual Property and Repor		y and Reporting		Draft	Edit		
iconomic impact	Economic Impact			Draft	Edit		
upporting Documents	Supporting Docum	ents		Draft	Edit		
Review and Submit							
	Complete We						
		all sections of the Annu Annual Progress Repo			selecting each tab to vi option	ew and complete each	
		initianit regione ricepoi			- Prising		
	● Verify Before	Submit O Delegate	this Task				
			and the design		100		
	Chaose the reci	pient of the next action	item for this docum	ent. Doe, Jane Pl/PD			
	Submit						
	No notes available.						



Change Requests

	Hom	e Grants Corresp				
			ondence & Notifications			
				Lo	gged in as: JohnDASO (John D	oe) [<u>not JohnDASO click h</u> > Grants > Change Request
Change Requests						
	Grant ID:	RP130000	Grant	: Title: Test Grant 1 for CGMS Tra	aining	
	PI/PD/CR:	Jane Doe	Organiza	ation: XYZ University (Primary)		
Grant Information		Documents & Forms Corres	Budget & Financial Spondence Status Reports	Progress Change Reports Requests		
	ts					
hange Request Typ dvancement of Fund < first < prev 1 ne	pe: s Form		w Change Request			
dvancement of Fund	pe: s Form		w Change Request	status	Request Details	View Request
dvancement of Funds < first < prev 1 ne Request Date	pe: is Form ext > last >> 5 to	otal records		Status Complete Web Form	Request Details	View Request
dvancement of Fund: < first < prev 1 ne Request Date 30 Aug 2012	pe: s Form ext > last >> 5 to Originator	otal records Request Category	Request Type Advancement of Funds		Request Details	
dvancement of Fund < first < prev 1 ne Request Date 30 Aug 2012 28 Aug 2012	pe: is Form ext > last >> 5 to Originator Doe, John	Detail records Request Category Budget and LOE	Request Type Advancement of Funds Form Attachment F - Change	Complete Web Form	Request Details	
dvancement of Fund: < first < prev	pe: is Form ext > last >> 5 to Originator Doe, John TraicoffCM, JuneT	Detail records Request Category Budget and LOE Contract	Request Type Advancement of Funds Form Attachment F - Change Request Change in Key Personnel Level of Effort	Complete Web Form Canceled - user being replaced	Request Details	<u>View / Edit</u>



Change Requests Dropdown Menu

Grant Information		Documents & Corre		Progress Change Reports Requests		
nange Requ	ests					
hange Request						
dvancement of Fund		Create New Change Req	luest			
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udget Supplement (Change Request Form	total records				
hange - Not Otherwi hange in Key Perso	Change Request Form rise Specified Innel Level of Effort (LOE)	total records Request Category	Request Type 🔺	Status	Request Details	View Request
udget Supplement (hange - Not Otherwi hange in Key Perso ontract Amendment o Cost Extension	Change Request Form rise Specified Innel Level of Effort (LOE)		Request Type Attachment F - Change Request	Status Complete Web Form	Request Details	View Request
udget Supplement (hange - Not Otherwi hange in Key Perso ontract Amendment	Change Request Form rise Specified Innel Level of Effort (LOE)	Request Category	Attachment F - Change		Request Details	View Request



Change Requests — Action Page

Grant Documents & Documents & Forms	Budget & Financial Status Reports Reports Change Requests Close Out				
Back to Change Requests					
* Change Request Details:	Change - Not Otherwise Specified Text Editing Tools				
	Font Name and Size Font Style Lists Arial Image: Arial				
* Justification:	body				
Complete Web Form	(5,000 chars. limit)				
You must provide a detailed description and justification of what you need changed. Save as Draft and Continue Editing Save as Draft and Close Verify Before Submit (provide justification for request) Cancel Request					
Submit No notes available.					



5 Key Points to Remember

- "Right person, Right function, Right time"
- Home and Grants Information pages
- Web forms
- Password signatures
- Repository



Technical Support

- Hours of Operation:
 - Monday through Friday (excluding public holidays)
 - 7 am to 4 pm Central Time
- Tel: 866-941-7146
- Email: help@cpritgrants.org

