

SMITHSONIAN INSTITUTION

TIME & EFFORT CERTIFICATION
(for documenting cost sharing)*

SECTION I

NAME: _____ SSN: _____

MUSEUM/INSTITUTE/OFFICE: _____

DESIGNATED CODE: _____

PROJECT TITLE: _____

SPONSOR: _____

During the period _____ to _____, I spent _____ percent of my job duties working on the above referenced project.

SIGNATURE

DATE

SECTION II

GRADE/STEP: _____ FRINGE BENEFIT RATE: _____

INDIRECT COST RATE: _____

GRADE/STEP * PERCENT EFFORT FROM SECTION I _____ (a)

FRINGE BENEFITS (a) * FRINGE BENEFIT RATE _____ (b)

SUBTOTAL _____ (a+b)

INDIRECT COSTS (a+b) * INDIRECT COST RATE _____

TOTAL _____

FUND MANAGER SIGNATURE

DATE

SECTION III

Verified by Principal Investigator:

PI SIGNATURE

DATE

*Cost sharing documents are to be maintained by the Principal Investigator's department in the event of audit.

REPORT OF COST SHARING EXPENDITURES

SI Designated Code: _____
Principal Investigator: _____

Sponsor Grant Number: _____
For the Period: From _____ To _____

Designated codes and object codes used for cost sharing (itemized expenses by object code)

Designated Code 1 _____

Object Code(s)	\$ Amount
a) _____	_____
b) _____	_____
c) _____	_____
d) _____	_____
	Subtotal _____

Designated Code 2 _____

Object Code(s)	\$ Amount
a) _____	_____
b) _____	_____
c) _____	_____
d) _____	_____
	Subtotal _____

Total Cost-Share _____

I certify that the above expenses reported: (1) relate to and support the cited project; (2) are documented in the official SI accounting records; and (3) reflect the cost-sharing for this award.

PI Signature

Date

In support of this report, PIs must retain a copy of the OC Financial Transaction Lists which document the expenditures reported above.

