

CONTRACT/ASSISTANCE CLOSEOUT CHECK-LIST

Copy of checklist to (if checked):

Name of Organization:

Agreement Number:

Agreement:	Contract	Grant	Cooperative Agreement
Agreement Type:	Cost Reimbursement		Fixed Price Other
Performance Completion Date:			Amended Through Mod #

ACTION ITEMS

ACTION COMPLETED DATE

Request for GTR Assessment Sent

GTR Assessment Received

Closeout Letter Mailed to Recipient/Contractor

Final- Closeout Forms Received

- Assignment
- Release
- Patent
- Subcontract/Subcontractor Plans
- Property Report
- Other

Audit Requested

Audit Received

Negotiations Completed

Closeout Mod Issued/Checklist

Closeout Mod Executed

Final Invoice Forwarded to OFA

Funds due to the Government Recovered (if applicable)

FRC Date

NOTE TO THE REGIONAL ACCOUNTING DIVISION:

After payment of the final voucher, a deobligation of \$                      should be made.

APPROPRIATION NUMBER:

COMMENTS:

Administrator                                      Contracting/Grant/Coop. Agreement/Officer

Date    Date