

**AFTER THE FACT COST SHARING DOCUMENTATION
REGULAR MONTHLY EFFORT ONLY**

DATE: _____

COST SHARING FOR ACCOUNT # 5-_____

The following employee(s) worked on the above referenced project. Because their effort was not billed to the sponsor, the effort should be documented as cost sharing.

Name and PeopleSoft ID	Pay Source and Object Code	Cost Share Percentage	Survey Period for cost sharing
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Example:

John Doe -000246810	246810-51410	2%	07/01/2002 06/30/2003
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Survey Periods: 07/01/2XXX – 06/30/2XXX PLEASE USE A SEPARATE LINE FOR EACH FISCAL YEAR
08/16/2XXX – 05/15/2XXX

For C&G Office Use

CERTIFICATION: I certify that I have first hand knowledge that the effort shown above is a reasonable approximation of actual effort expended during the relevant time period.

- 1) _____
Name (Please Print) Employee or Other* Signature and DATE Relation if other than employee
 - 2) _____
Name (Please Print) Employee or Other* Signature and DATE Relation if other than employee
 - 3) _____
Name (Please Print) Employee or Other* Signature and DATE Relation if other than employee
- *(Principal Investigator, Supervisor, or Department Head)

Please explain in detail why this was not documented in the TEARS system:

Prepared by: _____ Department: _____

Telephone extension: _____ Campus Box Number: _____