



MEMORANDUM

TO: Project Accounting Officer

FROM: _____
Supervising Administrator (please print)

RE: VERIFICATION OF WORK PERFORMED BY FULL-TIME EMPLOYEES PAID FROM FUND II

Grant Title

Budget Number

Grant Beginning Date

Grant Ending Date

As supervising administrator for the above-referenced grant I have verified that the following employee's work was performed and that salaries charged to this grant are direct charges and are reasonable in relation to the work performed.

I certify that (name) _____ worked 100 %

as a (title) _____

from (date) _____ to (date) _____

Supervisor's Signature

Date

Supervising Administrator's Signature

Date