THE AMERICAN CHEMICAL SOCIETY PETROLEUM RESEARCH FUND

Grant Administration Form – UNI Grants

The information furnished herein will be used for the preparation of a formal grant agreement between the American Chemical Society and your institution. It must be approved by an appropriate officer of the institution.

PRF No. _____ Principal Investigator: _____

Legal Name of Grantee Institution: _____

Federal Tax ID No. (REQUIRED): _____

The payment address we have on record for your institution is as follows:

Any changes should be noted. However, please remember that we can use only *one* payment address per institution for all grant payments. If payment address and tax id are blank, please supply. For foreign institutions without a U.S. tax ID, please attach proof of tax exempt status.

Payment will be made by: Check to above address ☐ ACH (with bank information on file) ☐

In order to change the method of payment from check to electronic transfer, the following information is required, **as well as a voided check (not a deposit slip):**

Name of financial institution: _____ ABA/Routing number: _____

Name of account: _____ Account number: _____

Ordinarily, the first payment is scheduled for the month in which the grant period starts and the second payments is scheduled for September of the following year. Please complete the schedule below if you need an early start date and an early payment, or a distribution of installments different from that shown on the proposal cover page. Such changes will not affect the stated termination date of the grant. The total grant may be paid in any desired annual amounts or as a lump sum. **No more than one payment per calendar year may be requested.**

PAYMENT	DATE	AMOUNT
1st	_____	_____
2nd	_____	_____

Comments: _____

Officer of the Institution Accepting the Grant _____

(Signature) (Printed Name and Title)

_____

(Email Address) (Telephone) (Date)

Revised 06/09