

## Financial Report for Dermatologist Investigator Research Fellowship

This report must be completed for each fellowship award granted by the Dermatology Foundation, and is to be prepared by the accountant, research funds manager or financial officer of the sponsoring institution. The Financial Report must be submitted **60 days** following the award period to dfrap@dermatologyfoundation.org. To confirm that you have met the reporting requirement for your award, **you will receive a return email confirmation from the DF**. If you do not receive this confirmation email, this please contact the office at 847-328-2256 or dfrap@dermatologyfoundation.org. The final award payment will be scheduled for disbursement once the Financial and Research Reports have been received. **Please note, award funds will not be distributed beyond one year of the award termination date.** 

Research Award Recipient: Research Award:					
Project Title:					
Research Award Period:		Start		End	
Institution:					
Award Amount:	\$				
Funds Available for Expendit	ure:				
Award Payment(s) Recei				\$	
Unpaid Award Balance				\$	(a)
Total				\$	(b)
Expenditures:					
Salaries				\$	
Benefits (Important—Attach certification that benefits				\$	
paid are consistent with ins				r	
Total				\$	(c)
Excess/(Shortage), (b) – (c):				\$	(d)
Unused Funds Due to DF: If it enter the amount here. This and If unused funds (e) exceed the eattach a check for the difference payable to the Dermatology Found	nount rep unpaid av to this re	resents unused vard balance (a) eport. ( <i>Make che</i>	funds. ), eck		
than the unpaid award balance, the DF will reduce the final				\$	(e)
award payment by (e).			•		
Approved By:		Certified	I Ву:		
Dermatology Dept. Chair/Chief	Date	Fiscal Officer	Signature		 Date
Prepared By:	Dale	i iscai Oilicei	Oignature		Dale
riepaieu by.					
Print Name Date		Telephone	Email		