Research Subaward Agreement Subrecipient Contacts

Subrecipient Place of Performancefor FFATA reporting			
Name:			
Address:			
City:	State:	Zip Code+4:	Zip Code <u>Look-up</u>
EIN No.:	DUNS:		Parent DUNS:
Institution Type:			Congressional District:
Is Subrecipient currently registered in SAM	l.gov? Yes	No	
Is Subrecipient exempt from reporting ex	ecutive compensatio	n? Yes I	No If no, complete 3B, page 2
Subrecipient Administrative Contact			
Name:			
Address:			
City:	State:	Zip Code:	
Telephone:	Email:		
Subrecipient Principal Investigator			
Name:			
Address:			
City:	State:	Zip Code:	
Telephone:	Email:		
Subrecipient Financial Contact			
Name:			
Address:			
City:	State:	Zip Code:	
Telephone:	Email:		
Central email:			

Please sign up for one of the two electronic payment methods identified below:

ACH (Automated Clearing House) - Please print and complete direct deposit form per instructions provided and return.

State:

Email:

www.uc.edu/af/controller/acctpayable.html

ePayables – funds will be available via a VISA "ghost" card system that uses a virtual credit card from the Bank of America. If you enroll in this program, a university credit card number will be assigned to Subrecipient. The card has unique security features, with \$0 of available funds until an invoice is approved for payment. Once a payment is approved, an electronic remittance advice will be sent to Subrecipient along with approval to charge the credit card for that amount. Your credit card processor will charge Subrecipient all applicable processing fees. For further information about this program, please contact Tina Huston at 513-556-6772.

Zip Code:

Subrecipient Authorized Official

Name:

Address:

City:

Telephone:

Central email: