

Changes to UW Sponsored Program Process

To Our Valued Sponsors,

The University of Washington is in the final months of a multi-year finance transformation program. This message is to inform you about several upcoming changes.

What's happening?

The University of Washington is replacing its current finance and procurement systems with Workday® Financials. This impacts all sponsors who work with the University of Washington. The changes will take effect on July 6, 2023.

What does this mean for you?

We are currently designing new procedures for sponsor invoicing, financial reporting, and award closeout within our new system. Here are some of the changes that may impact our sponsors:

- University of Washington's sponsor invoices, financial reports and award closeout documents will have a new look
- New UW Automated Clearing House (ACH) account information
- Refunds on sponsored programs will be paused from May 19th and will resume in mid-July

What won't change:

- Sponsor invoices and financial reports will continue to provide the same information such as award amounts, actual expenses, balances, and transaction-level detail if applicable
- Originating email address for sponsor invoices will remain gcahelp@uw.edu
- You can continue to send payments to our Bank of America lockbox in Chicago
- You can continue to contact the University's post-award financial department, Grant & Contract Accounting, at gcahelp@uw.edu and (206) 616-9995

What's next?

You can expect to see changes to our sponsor invoices, financial reports, and award closeout documents beginning in mid-July. You'll receive more specific information over the coming months regarding our new processes. In the meantime, if you have any questions, please email gcahelp@uw.edu.

We thank you for your support and look forward to our continued partnership as we move forward work through this transition.

Sincerely,

Juan Lepez, Director, UW Grant & Contract Accounting

**UNIVERSITY OF WASHINGTON
ACCOUNTS RECEIVABLE INVOICE
GRANT AND CONTRACT ACCOUNTING
TEL. (206) 616-9995 FAX. (206) 543-0764**

ATTN:
Mail To: RODRIGUEZ REYES, ITZEL

This invoice was emailed to:
karicle@uw.edu

Cover Page with Remittance Instructions

Attached please find an invoice for the grant/contract referenced below. Please return this cover page with payment, and reference Invoice# GCX 447551 and UW Budget# 627815 on the payment.

Please make checks payable to:

UNIVERSITY OF WASHINGTON
GRANT & CONTRACT ACCOUNTING
12455 COLLECTIONS DRIVE
CHICAGO, IL 60693

For electronic payments please include references at the beginning of the addenda/payment detail to avoid truncation.

Invoice Summary

Bill Date: 5/3/2023

Invoice#: GCX447551

U.W. Budget#: 627815

Grant/Contract#: 693JJ32250020

Grant Name: NORTHWESTERN TTAP

P.I. Name: Wang, Yinhai

U.W. Sponsor ID#: 390774

Terms: Net 30 Days

REQUEST FOR ADVANCE OR REIMBURSEMENT	1. TYPE OF PAYMENT REQUESTED	a."X" one or both boxes <input type="checkbox"/> ADVANCE <input checked="" type="checkbox"/> REIMBURSEMENT	2. BASIS OF REQUEST <input type="checkbox"/> CASH <input checked="" type="checkbox"/> ACCRUAL
		b."X" the application box <input type="checkbox"/> FINAL <input checked="" type="checkbox"/> PARTIAL	
3 FEDERAL SPONSORING AGENCY AND ORGANIZATIONAL ELEMENT TO WHICH THIS REPORT IS SUBMITTED RODRIGUEZ REYES, ITZEL		4. FEDERAL GRANT NUMBER OR OTHER IDENTIFYING NUMBER ASSIGNED BY FEDERAL AGENCY 693JJ32250020	
5. PARTIAL PAYMENT REQUEST NUMBER FOR THIS REQUEST GCX447551	6. EMPLOYER IDENTIFICATION NUMBER 916001537	7. FINANCIAL ASSISTANCE IDENTIFICATION NUMBER 627815	
8. PERIOD COVERED BY THIS REQUEST From: 3/1/2023 To: 5/3/2023			
9. RECIPIENT ORGANIZATION Name: UNIVERSITY OF WASHINGTON Street1: GRANT AND CONTRACT ACCOUNTING Street2: BOX 354966 City: Seattle County: King State: Washington Province: Country: United States ZIP / Postal Code: 98195-4966			
10. PAYEE (Where check is to be sent if different than item 9) Name: UNIVERSITY OF WASHINGTON Street1: GRANT & CONTRACT ACCOUNTING Street2: 12455 COLLECTIONS DRIVE City: Chicago County: State: Illinois Province: Country: United States ZIP / Postal Code: 60693			

11. COMPUTATION OF AMOUNT OF REIMBURSEMENTS/ADVANCES REQUESTED

PROGRAMS/FUNCTIONS/ACTIVITIES	(a)	(b)	(c)	TOTAL
a. Total program outlays to date (As of date) 5/3/2023	5,272.27			5,272.27
b. Less: Cumulative program income	0.00			0.00
c. Net program outlays (Line a minus line b)	5,272.27			5,272.27
d. Estimated net cash outlays for advance period	0.00			0.00
e. Total (Sum of lines c & d)	5,272.27			5,272.27
f. Non-Federal share of amount on line e	0.00			0.00
g. Federal share of amount on line e	5,272.27			5,272.27
h. Federal payments previously requested	3,802.11			3,802.11
i. Federal share now requested (Line g minus line h)	1,470.16			1,470.16
j. Advances required by month when requested by Federal grantor agency for use in making prescheduled advances	1st month			
	2nd month			
	3rd month			

12. ALTERNATE COMPUTATION FOR ADVANCES ONLY

a. Estimated federal cash outlays that will be made during period covered by the advance	
b. Less: Estimated balance of Federal cash on hand as of beginning of advance period	
c. Amount requested (Line a minus line b)	

13. CERTIFICATION

I certify that to the best of my knowledge and belief the data on the reverse are correct and that all outlays were made in accordance with the grant conditions of other agreement and that payment is due and has not been previously requested.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL

DATE

5/3/2023

TYPED OR PRINTED NAME AND TITLE

Prefix:		First Name:	JUAN	Middle Name:	
Last Name:			LEPEZ	Suffix:	
Title:			DIRECTOR, GCA		

TELEPHONE (AREA CODE, NUMBER, EXTENSION)

206-616-9995

THIS SPACE FOR AGENCY USE

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0004), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

BUDGET NUMBER

627815

NORTHWESTERN TTAP

INVOICE NUMBER GCX447551

PRINCIPAL INVESTIGATOR Wang, Yin Hai

GL Date	Account Code	Description	Amount	
3/21/2023	018009	Wiesner, Oliver	521.50	
*****	018009	HOURLY STUDENT SALARY	521.50	*****
3/3/2023	041000	Oliver Wiesner	74.00	
*****	041000	IN-STATE - PER DIEM	74.00	*****
3/3/2023	041200	Oliver Wiesner	365.49	
*****	041200	PRIVATE AUTO MILEAGE	365.49	*****
3/21/2023	070100	PAYROLL STAFF BENEFITS	0.52	
*****	070100	UNEMPLOYMENT COMP.	0.52	*****
3/21/2023	070200	PAYROLL STAFF BENEFITS	3.13	
*****	070200	MEDICAL AID & IND.INS.	3.13	*****
3/21/2023	070300	PAYROLL STAFF BENEFITS	1.56	
*****	070300	TA/RA HEALTH BENEFITS	1.56	*****
3/21/2023	070400	PAYROLL STAFF BENEFITS	2.09	
*****	070400	ANNUITY PREM(TIAA-CREF	2.09	*****
3/21/2023	070500	PAYROLL STAFF BENEFITS	38.07	
*****	070500	STATE RETIREMENT PREM.	38.07	*****
3/21/2023	070700	PAYROLL STAFF BENEFITS	28.68	
*****	070700	SOCIAL SECURITY PREM.	28.68	*****
3/21/2023	070800	PAYROLL STAFF BENEFITS	6.78	
*****	070800	MEDICARE	6.78	*****
3/21/2023	071000	PAYROLL STAFF BENEFITS	31.29	
*****	071000	HEALTH INSURANCE PLANS	31.29	*****
3/3/2023	259900	INDIRECT COST	162.61	
3/21/2023	259900	INDIRECT COST	234.44	
*****	259900	INDIRECT COST	397.05	*****
TOTAL :			\$1,470.16	