

**University of North Florida
Office of Research and Sponsored Programs**

CERTIFICATION OF CONTRACTOR'S PERFORMANCE

As Principal Investigator of the prime grant, I certify that services have been rendered in accordance with the agreement.

Contractor:

Deliverables:

Project Title:

UNF Account Number:

Principal Investigator

Date _____

Please return completed statement to:

Angela Gibson
Coordinator, Grants Accounting
Office of Research and Sponsored Programs
University of North Florida
Building 3/Room 2501