



PROJECT CLOSE OUT MEETING REQUEST FORM

Project Name:

Project Code: Contract Number:

End-Using Dept.:

Project Budget: ✓

Final Project Costs: ✓

Remaining Funds: ✓ *JK*

Funding Restrictions (Grant, Etc.):

Construction Manager Name:

Documentation Provided

Copy of Dept. Acceptance letter: Yes No

Date Final Request for Payment Received:

Facilities Director/ Project Manager Signature:

Administrative Use

Date Meeting Request Received:

Date of Project Close Out Meeting:

Project Completion Certification (To be completed & signed during CPM):

Recommendation for Remaining Project Funds

[Signature] 8/20/24
 Department Signature Date

[Signature] 8/21/24
 Facilities Management Signature Date

[Signature] 8/21/24
 Budget Signature Date

Debbie Cole Digitally signed by Debbie Cole
 Date: 2024.08.20 17:03:06 -04'00'

[Signature] 8/21/24
 Procurement Services Signature Date

[Signature] 8/21/24
 Administration/Fiscal Signature Date