|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Frey LogoNew logo JPG | | | | | | |
| Dale F. Frey Award for Breakthrough ScientistsExpenditure Report Form | | | | | | |
| Awardee: | | | | Institution: | | |
| DFS#: | | | | Institutional Award No.: | | |
| Initial Fellowship Award Start Date: | | | | Reporting Period: | | |
| Institutional Official’s Name and Position: | | | | Institutional Official’s Signature and Date: | | |
| *The Dale F. Frey Award provides $100,000 paid over one year and must be expended within two years of the initial award date. All awards will be made to the host institution for the support of the designated investigator. The funds are intended to be flexible and can be used for a variety of scientific needs including the awardee’s salary, salaries for professional and technical personnel, equipment, supplies, and other miscellaneous items required to conduct the research. Funds may also be used to defray the cost of the recipient’s healthcare benefits.* ***The award cannot be used for indirect costs or institutional overhead.*** | | | | | | |
| **Types of Expenditures:**  **Personnel:** *Names and positions of all personnel must be individually listed and the percentage of time to be devoted to the project by each person should be noted. Please justify the need for each person listed.*  **Equipment:** *Permanent equipment that costs more than $1000. Please list each item separately and include a justification of why it is needed.*  **Supplies:** *Group into major categories (chemicals, animals, etc.) and include a justification of why each is required.*  **Miscellaneous:** *List specific amounts for each item (healthcare benefits, computer time, pathology, scientific software, etc.) and indicate why each is required.* | | | | |
| **Year 1** | | | | | | |
| Type of Expenditure | | Item/Name | Justification | | Amount | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  |  | | $ | |
|  | |  | **TOTAL:** | | **$** | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Year 2** | | | |
| Type of Expenditure | Item/Name | Justification | Amount |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  | **TOTAL:** | **$** |