



UNIVERSITY OF WASHINGTON

Acceptance of Administrative Responsibility Form (AARF)

Project Title: LIFE SCIENCES BUILDING ROOFTOP SOLAR ARRAY (2)

Budget Number:

Grant Total: \$50,000

Primary Contact: Alex Ratcliff

By signing this form, I certify that I am the administrator (or equivalent) for my campus unit, in charge of expense, human resources, and other financial transactions; I agree to be responsible for any hiring actions and/or purchases associated with this project. I agree to financially track this project in a "16-" (ASUW) budget within the Financial Organization Code (OrgCode) structure of my unit (2574059000), and complete monthly BAR reconciliation.
unit OrgCode number

Notes (if applicable):

Name/Signature:

Michelle K. Conrad Date: 10/8/18

Title:

Administration

Department/Organization:

PAULOGY

Phone:

206-685-8241

Email:

MCONRAD@UW.EDU

Please save this completed form as "Project Contact Name_Project Name" and email it to csfcoord@uw.edu.
The email originating directly from the approving body will be considered a signature.