

CANADIAN RDC NETWORK-CFI REQUEST FOR PAYMENT FORM

PROCEDURES FOR REQUESTING PAYMENT BY A PARTICIPATING UNIVERSITY FOR CHARGES INCURRED RELATING TO THE CFI LEADING EDGE FUND AWARD FOR THE PROJECT # 11364 TITLED “NATIONAL RESEARCH DATA CENTRE NETWORK” (“THE PROJECT”)

Approved by The University of Manitoba, the “Lead Institution”, January 2009; Revised May 22, 2009

When to Use this Form

The first principle is that all requests must be consistent with CFI policies. This principle overrides any other provision in this document.

This *CRDCN-CFI Request for Payment Form*, the “Form”, applies to ALL items that are acquired for the Project, until the official approval of a “Purchase of Equipment List”. Once a “Purchase of Equipment List” has been duly approved and signed-off by the University of Manitoba and the CRDC Network it should be consulted to identify items that will then be subject to separate instituted procedures. This Form will then no longer be required by The University of Manitoba for items on the “Purchase of Equipment List”, because control and accountability of expenditures for these items in accordance with CFI policy will be the responsibility of the Participating University.

The anticipated “Purchase of Equipment List” will be compiled from CFI Item Numbers 13.37 and 13.38 of the CFI Itemized List. It is the intention of the Network to indicate to each Participating University the funding it will have available for acquiring items on the approved “Purchase of Equipment List” for the Project and transfer those funds to the Participating University to be spent under internal control and with full accountability of the Participating University in accordance with CFI policy. These expenditures must be reported to the Project Leader and Executive Director of the Canadian Research Data Centre (CRDC) Network by line Item Number as per the CFI Itemized List in accordance with the directives associated with the “Purchase of Equipment List”.

To obtain a “Purchase of Equipment List” for your Centre please contact the Executive Director of the Network at:

Gelareh Manghebati CFI Project Coordinator, CRDCN St. Paul's College, University of Manitoba Room 324 - 70 Dysart Rd. Winnipeg, Manitoba R3T 2M6 Phone: (204) 272-1636 Email: gelareh_manghebati@umanitoba.ca	C/O Dr. Raymond F. Currie Executive Director CRDCN 1- 77 Victor Lewis Dr. Winnipeg, MB R3P 2K6 Phone: (204) 487-0512 Email: currierf@mts.net
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The acquisition of any item that is not on the Network approved “Purchase of Equipment List” is subject to the procedures of this Form set out below.

How to Use this Form

Pre-Approval

1. The first principle is that all requests must be consistent with CFI policies. This principle overrides any other provision in this document.
2. A Participating University that intends to incur costs matched to the CFI Itemized List, but not matched to the “Purchase of Equipment List” (see section *When to Use this Form* above) must consult with the Executive Director of the CRDCN prior to expenditure. An “Item Description” and “Item No” will be assigned for completion of this *CRDCN-CFI Request for Payment Form*.
3. Three estimates of anticipated costs must be obtained and quotes submitted for pre-approval. When work is performed by internal sources, details should be provided in order to consider a request to waive the requirement for three quotes.
4. These estimates must include the assigned line Item Number(s) (refer clause 2) as per the Itemized List, and must be submitted to the Lead Institution, c/o Dr. Raymond Currie, the Project Leader and Executive Director of CRDCN at the address provided in the *When to Use this Form* section above.

Where necessary, Dr. Currie will consult with the CFI Implementation Committee of the CRDCN.

The University of Manitoba’s Financial Services Department will then be asked to provide its approval to ensure adherence to the CFI Policy and Program Guide and the University of Manitoba policies.

Expenditure

5. Once approved, the Lead Institution and/or the Project Leader will provide the Participating University with an authorized Part A of the *CRDCN-CFI Request for Payment Form* to proceed with the expenditure.

Reimbursement

6. The Participating University will submit its invoice to the University of Manitoba for payment, referencing the line Item Number as per the CFI Itemized List, and include a copy of a properly authorized *CRDCN-CFI Request For Payment Form* and any other backup documentation as necessary.

CANADIAN RDC NETWORK-CFI REQUEST FOR PAYMENT FORM

FORM FOR PROCEDURES TO REIMBURSE EXPENDITURES FROM THE CFI AWARD TO A UNIVERSITY IN THE NATIONAL RESEARCH DATA CENTRE NETWORK PROJECT

Prepared by the University of Manitoba, January 2009; Revised May 22, 2009

A. Pre-Approval

1. Name of University: _____
2. Name of Academic Director of the RDC: _____
3. Name of person responsible in the Purchasing unit: _____
 Tel.: _____ e-mail: _____
4. Item to be purchased: CFI Itemized List line Item No: _____
 CFI Itemized List Item Description: _____
5. Summary of three cost estimates (where appropriate). Attach copies of each quote separately:

Rank quotes in order of ascending price	Supplier Name	Price CAD \$ (before taxes)
Quote 1		
Quote 2		
Quote 3		

6. Recommendation of the University (If lowest bid is not preferred, explain why in applicable fields below. Attach justifications where appropriate):

Quote rank number (1, 2 or 3) from Section 5	Supplier Name	Price in CAD \$ (before taxes)

If Quote # 2 or # 3 is selected, provide reasons for disqualifying Quote # 1:

If Quote # 3 is selected, provide reasons for disqualifying Quote # 2:

Send To (via email):	
Gelareh Manghebati CFI Project Coordinator, CRDCN St. Paul's College, University of Manitoba Room 324 - 70 Dysart Rd. Winnipeg, Manitoba R3T 2M6 Phone: (204) 272-1636 Email: gelareh_manghebati@umanitoba.ca	C/O Dr. Raymond F. Currie Executive Director CRDCN 1- 77 Victor Lewis Dr. Winnipeg, MB R3P 2K6 Phone: (204) 487-0512 Email: currierf@mts.net

<i>Section 7-9: For University of Manitoba Use (Pre-Approval)</i>			
7. Approval of CRDCN: _____			
	Name (Print)	Signature	Date
8. Approval of University of Manitoba:			
8.1 Purchasing Services: _____			
	Name (Print)	Signature	Date
8.2 Budgets & Grants: _____			
	Name (Print)	Signature	Date
9. CFI Itemized List line Item No: _____			

B. Reimbursement

10. Inter-university transfer of funds invoice submitted to The University of Manitoba:

10.1 Invoice Number: _____

10.2 Amount: \$_____

10.3 _____
 Name of Person Authorizing Invoice (Print) Signature Date

<i>Section 11-12: For University of Manitoba Use (Reimbursement)</i>		
11. Request for Payment received by University of Manitoba: _____		
		Date
12. Execution of Inter-university transfer of funds		
_____	_____	_____
Name (Print)	Signature	Date