Assigned Proposal Number: ___

SURP Program, FY 2017
Assurance of Compliance

I _____(*print name*) attest that the work described in this SURP proposal

Does Not • Substitute for or increase funding for any specific tasks that are funded by any other source.

Does Not • Fund projects that will require the addition of non-SURP funds to accomplish the technical goals of the SURP project.

Does Not • Fund general purpose capital expenditures with the exception of the following equipment that is clearly required for this SURP project and is not otherwise readily available from the Laboratory inventory.

(Specify equipment or state none)

_____

_____

_____

Signature: _____ Date: _____