

**Joint Admission Medical Program  
FY 2020 Expenditure Report – Medical Schools  
Summer Program Distribution**

Institution \_\_\_\_\_ Date \_\_\_\_\_

<b>Income</b>	
FY2020 Distribution	
Total	
<b>Expenses</b>	
Salaries – Professional/Administrative	
Salaries – Faculty	
Salaries – Classified	
Wages – Student Assistant(s)	
Other Personnel Costs/Contract Services	
Stipends – Clinical Preceptors	
Stipends – Chaperones	
Student Housing	
Food/Meals (Students)	
Student Travel	
Summer Program Supplies	
Enrichment Activities <sup>1</sup>	
Other (must specify) <sup>2</sup>	
Total Expenses for FY 2020	
<b>Unspent funds not reported from past fiscal years</b>	
Unspent funds not reported	
Total Unspent Balance	

**Additional information required:** A copy of your institution’s monthly statement of account for JAMP funds, as of August 31, 2020 must be provided with this report.

**Unspent FY20 Funds:** Any funds that have been encumbered under the FY20-23 Agreement should be expended no later than September 30, 2020. All remaining funds must be returned no later than October 31, 2020.

**Certification:** By signing this document, I certify, to the best of my knowledge and belief, that this report is correct and that all outlays and unliquidated obligations are for the purpose set forth in the Agreement executed with the JAMP Council.

\_\_\_\_\_  
JAMP Council Member Signature Date

\_\_\_\_\_  
JAMP Council Member (print name)

\_\_\_\_\_  
Second Signer (signature required) Date

\_\_\_\_\_  
Second Signer (print name and title)

*The signature required must be the institution’s officer responsible for accountability of JAMP funds.  
This may be a vice president, controller, director or manager of contract and grants, or other business officer directly responsible for funds.*

<sup>1</sup> Please provide a description of summer program enrichment activities.

<sup>2</sup> The category “Other” should be used when no other category applies.