

STATE OF NORTH CAROLINA DEPARTMENT OF TRANSPORTATION

ROY COOPER GOVERNOR J.R. "JOEY" HOPKINS SECRETARY

CERTIFICATION OF FINAL INDIRECT COSTS

Firm Name:	
Final Indirect Cost Rates:	
Home Rate:	Field Rate:
Cost of Capital:	Other:
Fiscal Period Covered (mm/dd/yyyy): _	
	reviewed the proposal to establish final indirect rified above and to the best of my knowledge and
1.) All costs included in this prop in accordance with the cost pr of title 48, Code of Federal Reg	e any costs which are expressly unallowable under the
	events that have occurred affecting the firm's
*Signature:	
*Name of Certifying Official (Print): _	
*Title:	
Date of Certification (mm/dd/yyyy): _	
*Note: This form is to be completed by an individua	al executive or financial officer of the consultant at a level no lower

than a Vice President or Chief Financial Officer, or equivalent, who has the authority to represent the financial information utilized to establish the indirect cost rate proposal submitted in conjunction with a contract.