JAMP
Joint Admission Medical Program

JAMP FY2026 Expenditure Report

Medical Schools Administrative Distribution

Institution Name _____ Date _____

Financial Summary

Income	Amount $
FY Distribution	
Total	
Category	**Amount**
Salaries – Professional / Administrative	
Salaries – Faculty	
Salaries – Classified	
Wages – Students	
Other Personnel Costs / Contract Services*	
Fringe Benefits	
Maintenance and Operation	
Equipment Purchases[1]	
Capital Purchases[2]	
Travel[3]	
Other (specify)*	
Total Expenses for FY	
Unspent funds not reported from past fiscal years	
Unspent Balance	

Certification

By signing this document, I certify that this report is correct and that all outlays and obligations are for the purpose set forth in the Agreement executed with the JAMP Council.

JAMP Council Member Signature _____ **Date** _____

(print name) _____

Second Signer _____ **Date** _____

(print name and title) _____

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Notes

Attach the institution monthly statement of accounts for JAMP funds.
All encumbered funds must be expended before September 30, 2023.
All unspent funds must be returned after invoicing instructions are received.

[1] JAMP requires a list of all equipment purchases with a value of $250 or higher.

[2] JAMP defines capital expenditures as items of physical improvement, i.e. classroom, resource room, labs.

[3] Travel using JAMP funds should be for the enhancement of the program and be incurred by JAMP participants and or program facilitators.

[4] The category “Other” is to be used when no other category applies. Information must be provided to identify expenditure(s).

* A detailed explanation of expenditures is required for funds listed in this category.