



Purchase Order (PO) Payment Request Form

Complete this form to request payment on an open PO

Form Instructions: First, combine invoice(s), any supporting documentation and attach to this form. Save documents as one PDF file. Second, complete this form and provide PI or Designee Signature. Signature must be an Adobe digital ID certificate signature. Third, email the complete PDF file. Please list the PO number and award number in the subject line of the email.

Purchase Order Number _____ Vendor Name _____

Invoice Number	Invoice Date	Invoice Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Amount to be Paid _____

If there are multiple lines on the PO, please list breakdown of payment with corresponding PO line:

Check One: Partial Payment Final Payment and Cancel PO

NOTES/SPECIAL INSTRUCTIONS:

Principal Investigator or Designee Approval/Signature

Operation Manager Approval/Signature
