



The University of Georgia

Sub-Award Payment Form

Date: _____

This completed form, along with relevant invoices and payment documentation, should be scanned and uploaded as a comment in UGAmart on the purchase order. This comment should be addressed to cgadmin@uga.edu

Vendor Name	_____
Invoice Address	_____

Payment Information

Authorization for payment of Sub-Award Number _____

Issued to vendor _____

Attached is a copy of invoice(s) from the vendor detailing purpose of payment in the amount of \$ _____ regarding the Sub-Award Number referenced above.

(Please complete EACH field to expedite payment.)

Invoice Number	Amount	Final OR Partial	Activity ID

If the service included on the attached invoice(s) has been received or performed and payment is in order; please sign, date, and place this form on top of any other documents.

As a University of Georgia employee, I have examined the items received as shown on the invoice(s) listed above, and do hereby certify that they are the same items as to specifications, kind, quality and quantity as shown on the above referenced Sub-Award Number. For subcontract payments on restricted accounts: the costs invoiced are in the approved budget, and any outstanding technical requirements are current

Direct Dept. Inquiries To: _____	Phone: _____
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PI/ Dean/Vice President/Director/Delegated Authority's Signature

Date

Department Head's Signature

Date