UNIVERSITY OF ALASKA ANCHORAGE INVOICE APPROVAL FORM

UPLOAD INVOICE/ BACK-UP DOCS

TA /AT #.

A Purchase Order (PO) is required for all invoices to be paid through the Accounts Payable system. Please see <u>Procurement</u> <u>Services</u> for assistance in creating PO's. Please make sure the PO number is included on the invoice before it is submitted to Accounts Payable. For blanket purchase orders (BPO), write the call number on each invoice attached. Please review invoice for accuracy and consistency with PO description. You may approve more than one invoice if they are on the same PO / BPO. This form should not be used for cash pays (e.g. honorariums).

Invoice contains travel evenences

Type of PO:		er backup showing actual exper	•		
PO no./call no	.:	BPO # :			
	d a requisition, please wait until after the PO is				
Invoice no.(s):		Invoice date(s):			
Vendor name:					
(must match invoice	e)				
Remit: 🗖 Sam	e as invoice "remit address" D Hold ch	neck for pickup:			
		Name		Phone Number	
New address					
	Street	City	State	Zip Code	
•	e or service was received: ance e.g. September 2017 through January 2018)				
This is	payment for PO/Call #				
	ACCT The data below must match PO encumbranc				

LINE	SEQ.	FUND	ORG	ACCT	AMOUNT	\$
LINE	SEQ.	FUND	ORG	ACCT	AMOUNT	\$
LINE	SEQ.	FUND	ORG	ACCT	AMOUNT	\$
					TOTAL	\$

Approvals—*I* hereby approve the invoice(s) for payment:

Electronic signature of Dept./Fiscal Person/Approver 1:

Electronic signature of Budget/Grant/Approver 2:

Grant approval—*Required for payments for professional services from restricted funds:*

My signature, below, certifies that I approve payment of this invoice and that the charges appear reasonable, and progress to date on this project is satisfactory and in keeping with the statement of work.

Principal Investigator or Authorized Designated Signatory

Comments to AP:

Tune of DO.