



Departmental Partial Payment

To
Accounts Payable Department
Business Services Building
Campus 30602-4214
706-542-2786

From

MESSAGE

Reference:

Date _____

Authorization for Partial/Final Payment of State Purchase Order Number _____ or University Field
Purchase Order Number _____, issued to _____

Attached is a copy/copies of invoice(s), as recorded below, totaling \$ _____ applicable to the
State Purchase Order or the University Field Purchase Order referenced above, if the merchandise included on the attached
invoice(s) has been received or the services performed, and payment is in order, please sign this form in the space provided below
and return to this department. A self-addressed envelope is enclosed.

Invoice Number	Amount	Invoice Number	Amount	Invoice Number	Amount

As receiving agent for the University of Georgia, 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 State Purchase Order or University Field Purchase Order; or do hereby certify that the services have been performed as stated on the invoice(s) and in accordance with the terms of the Purchase Order. Payment of the invoice(s) listed heron is thereby approved.

Signature _____

Date _____