

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 \_\_\_\_\_