University of Central Florida

FACILITIES & SAFETY BUSINESS OFFICE

INVOICE SUMMARY LETTER AUTHORIZING PAYMENT

Project: _____

Vendor Name: _____

UNIVERSITY OF CENTRAL FLORIDA PURCHASE ORDER NO. _____
Subcontractor Pay Requisition No. _____
Date: _____

Purchase Order Amount: $ _____
Previous Amount Paid: $ _____
Amount this Period: $ _____

Balance to Finish: $ _____

Sales Tax Savings This Period: $ _____

Total Sales Tax Savings accrued to date this Purchase Order: $ _____

Invoice No.	Invoice Date	Amount
		$
		$
		$
		$
		$
		$
		$

All materials for the above invoices has been delivered to the University of Central Florida campus, in good condition, and is for use at the University of Central Florida.

Total Invoices This Period: $ _____

Approved for Payment:
(Subcontractor Name) _____

(Authorized Subcontractor Signature) _____

Construction Manager Approval: _____

To be completed by Subcontractor