

INVOICE PAYMENT AUTHORIZATION FORM

Vendor Legal Name and Address

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- To be used **ONLY** when requesting payment for multiple invoices that are to be **paid from the same PeopleSoft Account Number**.
 - You may staple the invoices to the back of this form.
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PS Account
(6)

Fund
(3)

Dept ID
(7)

Project/Grant
(6)

Description: (max. 30 characters) Appears on financial reports, not on check stub

<u>Invoice Number</u>	<u>Invoice Date</u> (mm/dd/yy)	<u>Amount</u>	<u>Invoice Number</u>	<u>Invoice Date</u> (mm/dd/yy)	<u>Amount</u>
1			9		
2			10		
3			11		
4			12		
5			13		
6			14		
7			15		
8			16		

TOTAL

Prepared By:

Signature: _____

Authorized By:

Signature: _____