

SUBCONTRACTOR INVOICE APPROVAL FORM

То	:	Lei Tang
Fro m	:	
Date	:	
Subject	:	Sub c o ntra c t p a ym e nt re q ue st
The Department received the enclosed invoice/s for:		
Subaward	еe	:
Da	a te	:
Fu	ınd	: AcctCode :
ER	S#	:
To	tal	:
This Invoice has been approved for payment, Please process ASAP.		
Thank you for your prompt attention to this matter.		
Icertify that all of the expenditures reported (or payment requested) are for appropriate purposes and in accordance with the provision of the application and award document.		
Further, Icertify that I have properly monitored this collaborator and I am sa tisfied with their work.		
PI Sig na tui		Date
II Dig II a WI		Da w