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TOTAL PAYMENT REQUEST								

Submit this completed and signed Request for Payment form to Accounts Payable via email at ppsap @pps.net with the following attachments:

- o The contractor's invoice
- Original receipts from contractor if needed. (Original receipts are required if the contract states that expenses are to be reimbursed based on receipts.)

<u>Please note:</u> The attached invoice must contain, at a minimum, the following fields: Vendor name and contact information, invoice date, contract number, dates of service, a <u>detailed</u> description of service, payment rate, total payment due, and remit to address. Invoices with insufficient detail will be rejected.

ADMINISTRATOR'S ATTESTING SIGNATURE

I attest that all