



Eastern Kentucky University
Facilities Management

**Invoice & Receiving Report For Technical
Services & Construction Contracts**

Date: _____

Page _____ Of _____

Purchase Order Number
RCF Number

FOR OFFICE USE ONLY							
FY	CHART	FUND	ORG	PROGRAM	ACCOUNT	ACTIVITY CODE	AMOUNT
VENDOR					EKU Vendor ID		Invoice Number
Complete Mailing Address					For Capital Construction & Project Admin./Contract Admin. Use Only		
					Receiver Number		Date to Accounting
					Delivery Type		Partial Payments Authorized
					☐ Final ☐ Partial	☐ Yes ☐ No	
Project Title: _____					CHECK NO.		DATE MAILED

Item No	Description					Amount
	DESCRIPTION	LABOR	MATERIAL	VALUE	% COMPLETE	
				\$ -		\$ -
				\$ -		\$ -
				\$ -		\$ -
				\$ -		\$ -
				\$ -		\$ -
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				\$ -		\$ -
				\$ -		\$ -
				\$ -		\$ -
				Totals	\$ -	\$ -
	Less Retainage Enter Current Retainage Percentage _____					\$ -
	Less Previous payments					
VENDOR'S CERTIFICATION					TOTAL AMOUNT: \$ -	

I hereby certify that the work and/or services specified above have been furnished and received by Eastern Kentucky University in accordance with the provisions of the above mentioned contract.

Firm Name of Vendor

Vendor's (Contractor, Architect or Engineer) Signature

Date

Approved by: _____
Architect/Engineer-Consultant Date

Approved by: _____
Project Manager Date

Consultant Firm Name

Approved by: _____
Associate VP - FM & Safety Date

Audited by: _____
Date

Date	The date of submission of the Change Order form
Page ____ of ____	The page number followed by the total number of pages
Purchase Order Number	The official ECU document ID for work being completed
RCF Number	ECU project number
Vendor Name	Name of your company
Vendor Number	Official ECU Vendor ID number (900 number)
Invoice Number	Assigned to the vendor
Project Title	The name of the project
Item Number	List of Vendor's product number(s)
Description	Description of work including cost of Labor, Material, and % Complete
Amount	Total cost per Item Number
Firm Name of Vendor	Name of Vendor's company
Vendor's Signature	Please sign and date form
Architect/Engineer Consultant	Please sign and date form
Architect/Engineer Firm Name	Name of the consulting firm
Audited By	Please sign and date form