

**CONTRACT/LEASE
PAYMENT APPROVAL FORM
COMPLETE AND FORWARD TO THE NEXT DEPARTMENT**

COMPLETED BY DEPARTMENT

DATE: _____

VENDOR NAME: _____ VENDOR #: _____

CONTRACT/LEASE#: _____

| VENDOR INVOICE # | TASK ORDER # <i>(If Applicable)</i> | COUNTY/FEMA PROJECT # <i>(If Applicable)</i> | BUDGET DEPARTMENT # | ACCOUNT # | AMOUNT \$ |
|---------------------|---|--|------------------------|-----------|-----------|
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| | | | | | |
| | | | | | |
| TOTAL | | | | | |

APPROVED FOR PROGRESS PAYMENT *(please sign, as applicable and date)*

CONTRACTOR'S ENGINEER/ARCHITECT/PROJECT MANAGER: _____ DATE: _____

COUNTY SUPERVISOR/PROJECT MANAGER: _____ DATE: _____

DEPARTMENT DIRECTOR: _____ DATE: _____

GRANTS ADMINISTRATION: _____ DATE: _____
(If Applicable)

COUNTY ADMINISTRATOR: _____ DATE: _____
(Payments > \$50,000.)

FINAL PAYMENT

FINAL PAYMENT YES NO *(If "Yes", forward to Purchasing Services Coordinator for Close-Out)*

DATE: _____ OMB DIRECTOR: _____ *(Payments < \$50,000)*

DATE: _____ GRANTS ADMINISTRATION APPROVAL: _____
(If Applicable)

DATE: _____ COUNTY ADMINISTRATION APPROVAL: _____
(Payments > \$50,000)

COMPLETED BY FINANCE - ACCOUNTS PAYABLE ONLY

FISCAL YEAR: _____

DATE RECEIVED: _____

REVIEWED BY: _____