

East Tennessee State University

Subaward Payment Authorization Form

In order to ensure compliance with Federal, State, and University requirements, the following information is required when a department requests payment of a Subrecipient invoice. If this form does not accompany your request for payment of a Subrecipient invoice, the department will be notified by Grant Accounting and payment to the Subrecipient could be delayed.

Subaward No:	
Payment Amount*:	
Invoice No:	

*If different than amount requested, please provide explanation on an attached sheet.

Principal Investigator Certification

- The attached invoice represents a request for payment that is in accordance with technical progress on the Scope of Work of the Subaward to date.
- Records of Subrecipient's Technical or Performance reports will be retained and made available for review upon request by Grant Accounting.
- Regular verification of Subrecipient performance has occurred through (one or more of the following MUST be checked):
 - Receipt of written Technical and/or Performance reports
 - Telephone conversations
 - E-mail correspondence
 - Other. Please explain: _____

This signature certifies all above actions have been completed:

Signature of the Principal Investigator: _____ Date: _____

Printed Name: _____

Business Officer Certification

- I have a Fully Signed Subaward or Subaward Modification for the period of performance indicated in this invoice.
- The attached invoice has been reviewed for compliance with the Subaward Budget.
- The attached invoice has been reviewed for allowability of costs in accordance with the prime award.
- The Subrecipient has provided an invoice, including the required certification language (see 2 CFR 200.415), and the appropriate system-generated financial backup documentation, as required by the Subaward terms and conditions.

This signature certifies all above actions have been completed:

Signature of the Business Official: _____ Date: _____

Printed Name: _____