

UCSD DISBURSEMENTS FAX TRANSMITTAL FOR SUBRECIPIENT INVOICE TO BE PAID

Attach this cover sheet to its corresponding invoice and fax to UCSD Disbursements: **(858) 822-7497**

Please make sure each fax transmittal form along with its corresponding subrecipient invoice is faxed separately.

FAX INFORMATION

From:	Subrecipient:
Total Number of Pages:	PO #:
Date Faxed:	Invoice #:
Phone #:	Invoice Amount:

SUBRECIPIENT INVOICE MONITORING

The attached invoice has been reviewed confirming costs for work performed are reasonable, allowable, and applicable, expenditure is within the parameters of the sub-award budget, and that costs were incurred during the period of performance for the award.

PI or Designee's Signature

PI or Designee's Printed Name

Date Signed

PLEASE PROVIDE THE DEPT CONTACT EMAIL ADDRESS:

Only invoices that have been approved with the signature of the responsible PI or Designee are to be faxed. We encourage you to retain the originals of the reviewed and verified documents for your internal departmental purposes. If the PI/Designee is not available to physically sign the transmittal form, an email approval is acceptable as long as it contains the PO #, invoice #, dollar amount and subrecipient (supplier) name in the text.

INVOICES \$10K AND GREATER SIGNATURE APPROVAL – ONLY REQUIRED FOR IFIS POs

Please include the following information on the invoice if amount \$10K and greater to provide the required approval verifying receipt of goods and/or that services have been performed.

This differs from the above responsibility and is required by UC policy for payment:

- Print invoice and write, stamp, or otherwise state on the invoice that is approved for payment
- Person with signature authority must sign, print name, and add telephone number
- Indicate date that the invoice was approved
- Electronic/Digital signatures are not acceptable due to security risks