

CITY OF FRIENDSWOOD Enter Department Name Payment Authorization for Enter Project Name			
Project Number:	Enter Project Number	Contractor:	Enter Contractor Name
Vendor Number:	Enter Vendor Number	Address:	Enter Contractor Address
Purchase Order (PO) Number:	Enter Purchase Order Number	City, State Zip:	Enter Contractor City, State and Zip (
Current PO Number (if rolled over):		Phone Number:	Enter Contractor Phone
Invoice Number:	<input style="width: 100%;" type="text"/>		
Invoice Date:	<input style="width: 100%;" type="text"/>		
Pay Application Number:	1		
Amount Requested:	<input style="width: 100%; text-align: right;" type="text" value="\$0.00"/>		
Original Contract Amount:	\$0.00		
Approved Change Orders to Date:	\$0.00		
Current Contract Amount:	\$0.00		
Total Work Completed per this Invoice:	<input style="width: 100%; text-align: right;" type="text" value="\$0.00"/>		
Total Retainage Held per this Invoice:	\$0.00		
Total Previously Paid:	\$0.00		
Amount Recommended for Payment:	\$0.00		
Total Paid Inclusive of this Invoice:	\$0.00		
Total Retainage Inclusive of this Invoice:	\$0.00		
Total Funds Expended To Date:	\$0.00		
Remaining Contract Funds	\$0.00		

Prepared By:

 Name of Office Manager or Project Manager
 Office Manager or Project Manager

 Date

Reviewed By:

 Bria A. Whitmire, PE, CFM
 Projects Coordinator

 Date

Approved By:

 Jil Arias, PE, CFM
 Director of Engineering

 Date