

## **INVOICE FOR WORK PERFORMED**

	This is to certify that I have worked on the			_ Project/Program for the		
Research & Development Corporation from the period beginning: payments totaling:	(date/year)	to	(date/year)	, total of		
Brief description of the work performed:						
I understand and agree that I shall not accept any compensation for compensated by other federal monies.	this work d	uring a t	ime when I	am being		
Name:						
Address:						
Tax Id Number:						
Signature:						
TO BE COMPLETED BY APPRO						
Purchase Order #:	Amount	- <b>-</b>				
Turchase Order #.	_ Amount	·•				
Vice President of Administrative Area:						
Date:						
Supervisor/Program Leader/Other:						
Date:						