



# 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: \_\_\_\_\_ to \_\_\_\_\_, total of payments totaling: \_\_\_\_\_  
(date/year) (date/year)

Brief description of the work performed:

I understand and agree that I shall not accept any compensation for this work during a time when I am being compensated by other federal monies.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Tax Id Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## TO BE COMPLETED BY APPROVING PARTY

Purchase Order #: \_\_\_\_\_ Amount: \_\_\_\_\_

Vice President of Administrative Area: \_\_\_\_\_

Date: \_\_\_\_\_

Supervisor/Program Leader/Other:

Date: