



Grandville Public Schools

CONTRACTED SERVICES – FIXED FEE PAYMENT REQUEST

Please process payment to the individual contractor referenced below. By approving this payment request, I am authorizing a lump sum payment to the contractor and verifying the services have been satisfactorily completed within the scope of the contracted services agreement.

Check Payable To:

(Contractor Name)

Total Amount Payable:

(Amount payable to the contractor at this time)

Purchase Order #:

(Or account number for contracts under \$100)

District Approval:

(Signature)

Date Approved:

Is this a full or partial payment? Full / Partial (Please circle)

(Please indicate partial payment if the contractor will be paid in more than one installment.)

Is this the final payment related to this agreement? Yes / No (Please circle)

(If this is the final payment, we will close the purchase order when payment is issued)

PLEASE RETURN COMPLETED FORM TO ACCOUNTS PAYABLE OFFICE.

NOTE – This form should only be used for contracted service agreements that have a fixed fee agreement. Agreements that pay the contractor an hourly rate, daily rate or other per unit rate should use the ‘Time Sheet/Billing Summary’.