University *of*
Massachusetts
Amherst

Invoice

e*mpac
Enterprise Management and Performance
Through Administrative Computing

DEPARTMENT:	Purchase Order #:
BUILDING:	Vendor's Code:
ATTN:	Invoice #:
	Date:

Name and **Remit** Address Of Vendor:	Vendor's Certification: **I certify that the goods were shipped or the services Rendered as set forth below.**
	(please sign in ink)

DESCRIPTION	AMOUNT

Acct:	Speed Chart:	Fund:	Dept. ID:	Prg:	Class:	Project/Grant:

Date Goods Received:	Verified By:

Departmental Approval:

Original-Controllers   Copy-Department

06/07/16