



Subrecipient Name: _____

RF Project/Task/Award: _____

Subrecipient Invoice Checklist

	Comments:
<input type="checkbox"/> Invoice #	
<input type="checkbox"/> Review Invoices	
<input type="checkbox"/> Amount is correct in accordance with budget	
<input type="checkbox"/> Sufficient detail is provided to permit identification of costs.	
<input type="checkbox"/> Request submission of backup documentation to support invoiced expenditures during the award period and/or at closeout. It may include: copies of paid invoices; detail of travel charges, payroll registers; time and effort reports.	
<input type="checkbox"/> Expenditures are in compliance with applicable laws, regulations and specific requirements of the program	
<input type="checkbox"/> Other special terms and conditions that may apply	
<input type="checkbox"/> Invoice is certified by subrecipient	
<input type="checkbox"/> Review Progress/Technical Reports and/or Deliverables	
<input type="checkbox"/> Have the RF PI sign certification re: completion of reports or receipt of deliverables	
Invoice Approved ____Yes ____No	Initial
If problems are encountered with the subrecipient, refer to Enforcement Measures for next steps as necessary.	