

# Appalachian State University

## Pre-Payment Authorization Form

The \_\_\_\_\_ Office/ Department recognizes that it is not the normal business  
Department/ Office Name  
practice of the University to make pre-payment for goods and services, however \_\_\_\_\_  
Department/ Office Name  
Office/ Department requests an exception in this case to purchase/ contract for : \_\_\_\_\_

\_\_\_\_\_ Product or Service  
From: \_\_\_\_\_ for a total cost of \$ \_\_\_\_\_ due to:  
Supplier/ Contractor Name

*Provide Justification in the space below*

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The \_\_\_\_\_ Office/ Department assumes all risks of loss or non-performance by the  
Department/ Office Name  
supplier/ contractor and will not hold Accounts Payable or the Purchasing Department liable for any loss or  
non-performance of the supplier/ contractor.

\_\_\_\_\_  
Authorized by: (Print Name)

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

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

\_\_\_\_\_  
Purchasing Department Approval

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