STATE OF TEXAS CONSTRUCTION VOUCHER
THE TEXAS A&M UNIVERSITY SYSTEM
FOR
PRAIRIE VIEW A&M UNIVERSITY

<table>
<thead>
<tr>
<th>Comptroller’s Vendor ID No.</th>
<th>Project/Invoice Number</th>
<th>Contract/Order Date</th>
<th>Invoice Rec’d Date</th>
<th>Period Covered</th>
<th>Estimate Due Date</th>
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<tbody>
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Pay To: (Name, Address, City, State, Zip)

Comp. Obj.  Agency Obj.  Amount:  Vendor Inv. No.:

Voucher Amount: $

<table>
<thead>
<tr>
<th>Account Number</th>
<th>Account Name</th>
<th>Contract Number</th>
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<table>
<thead>
<tr>
<th>Total Payments to Date</th>
<th>Unpaid Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

Original Contract: $__________________
Change Order No: ......(1-8) $__________________
TOTAL: $__________________
Amount Earned To Date: $__________________
Earned less Retained: $__________________
Previously Approved: $__________________
Estimated Amount Due: $__________________

ARCHITECT/ENGINEER CERTIFICATION
I certify that I have verified Construction Estimate, and that it is true and correct statement of work performed and materials supplied by the contractor, and that the contractor’s statement of his account and the amount due him is correct and that all work and material included in this estimate have been performed in full accordance with the terms and conditions of the corresponding construction contract documents and authorized changes thereof.

Signature Date

CONSTRUCTION CERTIFICATION

I ____________________________ do hereby certify that I am ____________________________ (Title of person certifying) and that I am duly authorized to make this certification for and on behalf of ____________________________ (Name of payee company/claimant)

I further certify that the attached invoice is correct and that it corresponds in every particular with the supplies and/or services contracted for. I further certify that the account is true, correct and unpaid.

Signature Date

AGENCY CERTIFICATION - I certify that the above services were rendered, or goods received and that they correspond in every particular with the contract under which they were procured and that the invoice is true, and unpaid.

Date Approved for Payment  20

Name Construction & Planning

Agency Fiscal Approval

Name Date

Agency No. 05  Agency Name: Prairie View A&M University  Estimate No.  Dept. Voucher No.