

Texas Tech University Health Sciences Center El Paso
Justification for Late Invoices

(Form located on AP website <http://elpaso.ttuhsoc.edu/businessaffairs/paymentservices/Policies.aspx> for direct data entry)

Vendor Name: _____

Vendor Invoice Number: _____

Vendor Invoice Date: _____

Date Invoice Received By Department: _____

Date Product or Service Received From Vendor: _____

Late interest will automatically be charged from the later of the day the goods or services were provided or the date the invoice was received but no later than 10 days from the invoice date unless sufficient justification can be provided. Dating the invoice received to avoid paying late interest is falsifying a State document and a violation of State law.

Was the delay caused by a dispute or a question to the vendor? Yes or No _____

If yes, please explain the nature of the dispute, the date the dispute was resolved, the name and phone number for the vendor contact that was assisting with the dispute and any other pertinent information that may be needed to document the refusal of late payment charges

Provide any additional information that may be applied to the decision regarding the applicability of assessing late payment penalties

Typed name of employee completing this justification _____

Signature _____

Date _____