



2 West Second Street • Suite 800 • Tulsa, OK 74103 • 918.584.7526 • Fax 918.583.1024

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## INCOG 2019 SECTION 5310 PAYMENT REQUEST

DATE:

REPORTING PERIOD:

SUBMITTING AGENCY:

CONTACT:

PHONE:

E-MAIL:

FUNDING SOURCE(S):           **SECTION 5310**

Expense Category:

Company of Invoice:

Invoice Item:

Check #:

Total Amount of Invoice:

Local Match:

Payment Request:

Date:

Requirements:

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\*Include full invoice s backup documentation

\*Attach copy of check showing payment