

City of Phoenix
Payment Ordinance Request



Contact Person Name & Extension:

Parent Payment Ordinance Number		Dept. Grant Number	
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Solicitation Number IFB / RFQ / RFP		Term Date for payment ordinance:	
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Vendor Name & Number	SRM Contract Number	City Clerk No.	Amount of Request

Department Number	Department Name	Amount for Department

Please attach all supporting documents:
Contract cover pg., Introduction, Option to Extend, Scope of Work-Purpose section, Offer,
Acceptance of Offer pages, Invoice or quote, Determination Memo

Detailed Description: