

# CASE WESTERN RESERVE UNIVERSITY

## Independent Contractor Deliverables & Invoice Certification Form

### Purpose

This Case Western Reserve University (CWRU) form certifies that an Independent Contractor (IC) or subrecipient has completed agreed-upon deliverables in accordance with the approved contract or agreement and applicable federal, state, and institutional requirements. Completion of this form is required prior to payment processing through CWRU Procurement and Accounts Payable and supports compliance with IRS regulations, federal audit standards, and university worker classification requirements. Completion of this form is required prior to payment processing and supports compliance with IRS regulations, federal audit standards, and worker classification requirements.

### Section 1: General Information

Department / Unit: \_\_\_\_\_

Requesting Manager / Project Owner / PI: \_\_\_\_\_

Email / Phone: \_\_\_\_\_

Independent Contractor / Subrecipient Name: \_\_\_\_\_

Company Name (if applicable): \_\_\_\_\_

Vendor ID (if known): \_\_\_\_\_

Contract / Agreement or Subaward Number: \_\_\_\_\_

Purchase Order (PO) Number: \_\_\_\_\_

### Section 2: Completion & Progress Verification

Payment is based on completed deliverables or acceptable progress toward milestones, not on hours worked or time-based measures.

Please select one:

☐ All deliverables/milestones have been completed in full and meet the agreed-upon scope, quality, and timeline.

☐ Deliverables/milestones are not complete (do not submit for payment).

Comments / Notes:

### Section 3: Invoice Information

Invoice Number: \_\_\_\_\_

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

Invoice Amount: \$ \_\_\_\_\_

Final Invoice? ☐ Yes ☐ No

☐ Invoice amount aligns with the approved contract/PO and completed deliverables or approved progress.

### Section 4: Certification & Authorization

By signing below, I certify that:

- The Independent Contractor/subrecipient has completed the deliverables or demonstrated acceptable progress as described above.
- All required reports and deliverables due under the agreement have been received.
- Services were performed in accordance with the approved contract, IC classification determination, and university policies.
- Payment is based on outcomes/deliverables, not hours worked, supervision, or method of performance.
- Payment is authorized to proceed.

Requesting Manager / Project Owner / PI (Print): \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Employee ID \_\_\_\_\_

**Submission Instructions:**

Attach this completed form to the invoice and submit as a single PDF to [invoices-pds@case.edu](mailto:invoices-pds@case.edu) in accordance with Case Western Reserve University Accounts Payable procedures. Ensure the Purchase Order (PO) number is listed on the invoice to avoid processing delays.

For questions:

- Subcontract risk or documentation: [subcontract@case.edu](mailto:subcontract@case.edu)
- Accounts Payable: [acctpay@case.edu](mailto:acctpay@case.edu)