

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 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
- Accounts Payable: acctpay@case.edu