

Massachusetts College of Liberal Arts
Notification of Payment Form

*NOP Form to be completed by the hiring department after services are completed in full, in lieu of a vendor invoice.
Completed form indicates approval granted by the hiring department for A&F to issue payment.
MCLA Contracts for Services are subject to 45-day payment terms from receipt of invoice or NOP.*

Contractor Name: _____ **Date of Service:** _____

Address: _____ **Contract #:** _____

City: _____ **State:** _____ **Zip Code:** _____

Description:	Amount:
Total:	

Payment Options: (Check one)

A. Hold Check for Hiring Department **Date check is needed by:** _____

B. Mail Check

Hiring Dept Signature: _____ **Date:** _____

Print Name: _____

Submit to Administration & Finance (A&F) Office