

School/Dept./Div. _____

Location Code _____ Telephone _____

Requisitioner _____

Payment Request No.	
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Please Print

This is your reference number
Alpha-numeric 10 digit maximum

Pay to: _____

Pay to Address:

Vendor Number: _____ (required) or secure Bid Request Application from the Procurement Web Page; have vendor complete and return to you for submitting with your Payment Request. If business is registered in Shelby Co. - Business License Number _____

[illegible]

Justification:

A P P R O V E D	Director of Major Construction/Facilities: _____	Date	
	Project Manager: _____	Date	
	Chief: _____	Date	
	Director - Federal Programs: _____	Date	
	Principal: _____	Date	
	Senior Accountant (Capital): _____	Date	
	Controller, Accounting and Reporting: _____	Date	
	Other (Title) _____	Date	
		Date	

Maintain copy of this form for your records. For questions call Accounts Payable @ 416-5407.