



On Campus Service Request & Payment Authorization

(Requisition) **Service Request** (Requisition)

To: _____ Date: _____
(Department To Provide Service – Vendor)

From: _____
(Department Requesting Service – Customer)

Fund _____ Org _____ Expense Acct _____ Amount _____

Description of Service or Materials Requested:

Requestor's Signature _____ Campus Ext. _____ Financial Manager's Signature _____

SEND REQUEST DIRECTLY TO DEPT. PROVIDING SERVICE



(Invoice) **Payment Request & Authorization** (Invoice)
(From Department Providing Service - Vendor)

Services Completed on: _____ Total Cost _____
(Date)

Payment Due To Dept. Org: _____
(Org Name) (Org #)

Mail Receipt Of Deposit To: _____
(Department or Person) (Campus Box)

Signature From Dept. Requesting Payment _____
(Signature) (Campus Ext) (Date)

After Services or Materials have been provided, fill out this bottom portion of form and submit to Payment Services, ADM. Bldg. Room 109, Campus 161, for Payment. Check will be issued and sent to the Bursar for deposit.