



Southern Methodist University

# PAYMENT REQUEST

ACCOUNTS PAYABLE, BOX 162

Check Number \_\_\_\_\_  
(for AP use only)

PO Number	Final Payment <input type="checkbox"/>	Date Due	<input type="checkbox"/> <i>Help with Form</i>	
Vendor ID/Code	Address Code	Invoice Number	Invoice Date / Service Date or Period	

Payee Legal Name (Individuals should include full first and last name and middle initial)		<b>Payment Handling Instructions:</b> <i>Payment will be made to payee via direct deposit (ACH) or EFT if account information is on file. Otherwise indicate below.</i>  Mail check to Permanent Address Mail check with Attachments Hold check for Pick-up Call Ext. _____		
SMU ID	Country (Foreign)			
Permanent Address				
City	State			

Reason for Payment	Reimbursement (Attachments Required) Honorarium (Provide details in Purpose of Payment) Other _____ Invoice attached	Purpose of Payment (Informational only; does not appear in GL detail)
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Department Name	Department Contact	Department Phone
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Preparer's Name (Typed or Printed)	Ext.	Authorized by (Financial Officer)	Date
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US Tax Residency Status U.S. Citizen Resident Alien Foreign National	Privacy Act Notice: IRC Section 6109 requires most recipients for services performed to give taxpayer identification numbers to payers who must report the payments to IRS. IRS uses the numbers for identification purposes. Payers must be given the numbers whether or not recipients are required to file tax returns. Payers must generally withhold taxes from taxable payments to a payee who does not furnish a taxpayer identification number to a payer. Certain penalties also apply.	U.S. Taxpayer ID Number <i>(for foreign persons only)</i>	W9 Form Attached On file
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**DISTRIBUTION**

Description (appears in GL detail)	Amount	Acct (4)	Fund (2)	Org (6)	Subclass (5)	Project (7)
<b>Total Payment Amount</b>						

**Special Approvals (Request must be signed by someone authorized to charge against the organization ID's referenced above)**

Typed or Printed Name	Signature	Title	Date
Typed or Printed Name	Signature	Title	Date
Typed or Printed Name	Signature	Title	Date
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