

OBERLIN COLLEGE

Controller's Office Request for Payment

Date of Request		Allow 7 - 10 business days for processing			
(1) T # (required) or Vendor ID (if known)*		(2) Tax Identification Number/SSN*			
<i>(3) Include a W-9 for new payees/vendors. As per IRS, sole proprietors and D/B/As are to provide SSN when requesting payment.*</i>					
(4) US Citizen? Y/N (Response Required)*		(5) If not a US Citizen, call payroll at ext. 55608; other information may be required. (HR approval required before payment can be processed.)*			
Payee (Legal Name)					
Address Line 1 <i>(Honorariums/Officials/Stipends require home address)</i>					
Address Line 2					
City		State		Zip	
Requestor's Name		Special Handling		Check Box	
		Send to Payee			
Campus Address/Ext #		Send to payee w/enclosure <i>(Please attach copy of enclosure)</i>			
		Send to requestor's campus address			
For Accounting Use Only: <input type="checkbox"/> W9 SCANNED <input type="checkbox"/> TRV ADV ON LOG <input type="checkbox"/> N/A <input type="checkbox"/> W9 ON FILE <input type="checkbox"/> TRV ADV OFF LOG		Will Call (Pick up at Controller's Office)			
(6) Description <i>(Business Expense Summary Form is required for Entertainment Charges)*</i>		(7) Charge to the following FOAP: *			
		Fund	Org	Acct	Prog
Amount to be Paid					

Signatures (both required)

(8) Requestor's Signature*

(9) Authorizing * (Approval by person with budgetary responsibility)

Printed Name/Date

Printed Name/Date

Payment requests should be submitted to accounts payable with the proper documentation attached to avoid unnecessary delays. Checks are generated on Tuesdays and Thursdays; allow 7-10 business days for processing. *Requisitions with missing backup will be returned for follow up.*

Controller's Use Only:

Entered by: _____

Approved: _____

PO# _____

Missing Backup? Y / N

HR Approval: _____

*Refer to "Request for Payment Requirements" chart for additional information.