

Payment Request Form

For all U.S. based Vendors, Honorariums & Reimbursements.
For international payments, use the Wire Transfer Request Form



Vendor Payments: Attach invoices as necessary

Invoice # :

Inv Date:

Due Date:

Honorariums & Reimbursements: Attach invoices & other documentation as necessary

Payee Name:

If first time payment to a non-Calvin individual (honorarium), LLC or LLP, a completed IRS form W-9 is **REQUIRED**.

Payee Address:

Required

Payee Calvin ID # (if Employee or Student):

Payee Email:

ACH (electronic) transfer is Calvin's preferred payment method.

Please have the payee complete the "ACH Authorization Form" if not done previously.

Most personal banking apps contain the necessary information to complete the form - please ask!

If payment can't be made by ACH and a Paper Check is needed:

Mail check to Payee? (Yes / No):

If No, send check to:

Description / Services Rendered	12 Digit Account # X-X-XXXXX-XXXXX	Amount
	Total (must agree to invoice)	
For meals & entertainment, you MUST provide <u>People</u> , <u>Place</u> , & Business <u>Purpose</u> . Original DETAILED receipts must be attached to this request.		
Purchaser	Calvin Email	Date
Budget Officer	Calvin Email	Date
VP / Provost (if amount > \$5,000, or if unsupported expenditure > \$25)		Date

Return completed form to Accounts Payable, SC 365. Questions? Call 66128

Initials

Date

A/P Sent Out:

A/P:

A/P Rec'd Back:

Controller:

Voucher #: