



Instructions

Ad Hoc Payment Request Form

NEW PAYEES MUST COMPLETE A W-9 FORM AND INCLUDED IT WHEN SUBMITTING THIS FORM

Submit the completed form with all required signatures through the following link: [Submit Accounts Payable Documents](#). Please **DO NOT** email duplicate copies of your documents directly to Accounts Payable.

For questions about the Ad Hoc Payment Request Form please contact Accounts Payable located in the [Office of Financial Services](#) located on the 3rd floor of the Student Services Center. Or call 501-916-3318.

The Ad Hoc Payment Request form is used to request and authorize payments to individuals or entities for non-employee compensation, such as payments to tax or other regulatory agencies, refunds to grantors, refunds to third party sponsors, etc. These are for one-time payments. Contact Accounts Payable for more information if needing multiple payments to an individual or entity.

→ Header Section

Contact Person: Who will Accounts Payable (AP) contact to answer questions regarding the payment(s)?

Phone Number: Contact person's phone number.

Contact Person Email: Contact person's UA Little Rock email address.

Payment Description: Enter a short description of the payment or the reason for issuing the payment.

Total Amount: Leave blank, the form will calculate the total amount based on the amounts entered in the Lines Section of the form.

Payment Type: "Check" is the current default payment method.

Payment Due Date: Enter the date payment should be made.

Handling Code: Select how the payment will be delivered or picked up.

Person Picking Up Check: When "Hold for Pickup" is selected, provide the name of the person who will pick up the check from the cashier's desk.

→ **Lines Section**

Payee: Enter the name of the person or entity to whom payment should be made.

Payee Address: Enter the payee’s mailing address.

Amount: Enter individual payment amounts on each line.

Spend Category: Enter the appropriate Spend Category.

WHEN USING SPEND CATEGORY: SC0194, USE NACUBO FUNCTION: FN0710 Under “Driver Worktag”

Driver Worktag Column: Select one of the Driver Worktag Types from the dropdown menu as shown in the image below:

Payment Due Date:		
Handling Code:		
FUNCTION: FN0710		Driver Worktag
Amount	Spend Category	Grant Worktag
		Agency Worktag
		Cost Center Worktag
		Debt Vehicle Worktag
		Designated Worktag
		Grant Worktag
		Program Worktag
		Project Worktag

After selecting the appropriate Driver Worktag Type, enter the Driver Worktag ID number in the cell(s) below.

→ **Additional Information Section**

Description/Special Instructions: Enter a description of the transaction and any special instructions that are necessary to successfully complete the transaction.

→ **Approvals Section**

Requestor Signature: The person requesting the payment must sign the form.

Budgetary Head Signature: The person authorized to approve financial transactions.

ORSP Signature: If you selected a Grant Worktag, route the form to ORSP for signature.