



Ad Hoc Payment Request

Header Section:

Date: _____

Contact Person: _____

Phone Number: _____

Contact Person Email: _____

Payment Description: _____

AP USE ONLY

MANUAL WIRE

Total Amount: _____

Payment Type: **Check**

Payment Due Date: _____

Handling Code: _____

Person Picking Up Check: _____

Lines Section:

WHEN USING SPEND CATEGORY: SC0194, USE NACUBO FUNCTION: FN0710

Driver Worktag

Payee Name (First, Last)	Payee Address	Amount	Spend Category	Driver Worktag

Additional Information Section:

Description/Special Instructions

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

Approvals Section:

Requestor Signature: _____
Date

Budgetary Head Signature: _____
Date

ORSP Signature: _____
(Obtain ORSP Signature, when using a Grant Worktag) Date