Wabash.

PAYMENT REQUEST FORM

Use this form to arrange for payment when a purchase order, p-card, or business travel expense report is not required.
PLEASE NOTE: Incomplete forms will be returned, delaying the payment process.

https://wabash.edu/businessoffice/boforms   https://wabash.edu/treasurersoffice/processes

PAYEE INFORMATION

PAYEE NAME		LAST 4 OF SSN OR EIN	COLLEAGUE VENDOR #

TRADE NAME (IF APPLICABLE)	PAYEE IS (CHECK ONE)		
	Employee	Student	Alumnus
PERMANENT HOME OR BUSINESS ADDRESS			
	Vendor	Parent	Other
	PAYEE EMAIL ADDRESS		

EXPENSE/ACCOUNT DETAILS

DESCRIPTION (Reimbursement, Refund, Honorarium, Product, Service, or Other)	DATE OF SERVICE or INVOICE DATE	GENERAL LEDGER ACCOUNT NUMBERS Example 11 12345 6789 00				AMOUNT
		FUND	**DEPARTMENT**	**OBJECT**	**COURSE**	
				TOTAL CHECK AMOUNT		

DESCRIBE THE PURPOSE OF THE PAYMENT   (Detail will be added to Self-Service)

PAYMENT PROCESSING

METHOD OF PAYMENT	Send documentation to the Business Office through Campus Mail or email https://www.accountspayable@wabash.edu
ACH (Direct Deposit)	
Check (mailed to address above)	**Payment Requests received Monday-Friday will be processed the following Thursday**

ATTACHMENTS (CHECK ALL THAT APPLY)

Forms can be found here : https://wabash.edu/businessoffice/boforms

		MUST BE ATTACHED: Documentation to support payment (i.e. receipt, invoice, brochure)
Vendor Direct Deposit Authorization Form	W-8BEN-Certificate of Foreign Status	
Copy of Contract (if required)	W-9-Request for Taxpayer Identification	Document(s) to be mailed with payment

SIGNATURES/APPROVALS

REQUESTED BY	REQUESTOR EMAIL	TELEPHONE	DATE
AUTHORIZED BY	AUTHORIZED SIGNATURE	TELEPHONE	DATE

ACCOUNTS PAYABLE USE

VOUCHER #	DATE	INITIALS

v3.19.21