



Southern Methodist University

PAYMENT REQUEST

ACCOUNTS PAYABLE, BOX 162

Check Number _____
(for AP use only)

Wire Transfer
Date wire to occur _____

PO Number	Final Payment	Date Due	Is Vendor a Corporation? Yes No	ICD Approved	Attach W9 if new vendor or changes to vendor	
Vendor ID/Code	Address Code	Invoice Number			Invoice Date / Service Date or Period	
Payee Legal Name (Individuals should include full first and last name and middle initial)				Payment Handling Instructions: <i>Payment will be made to payee via direct deposit (ACH) or EFT if account information is on file. Otherwise indicate below.</i> Mail check to Permanent Address Mail check with Attachments Hold check for Pick-up Call Ext. _____		
SMU ID		Country (Foreign)				
Permanent Address						
City		State	Zip			
Reason for Payment	Reimbursement (Attachments Required) Honorarium (Provide details in Purpose of Payment) Other _____ Invoice attached		Purpose of Payment (Informational only; does not appear in GL detail)			
Department Name			Department Contact		Department Phone	
Preparer's Name (Typed or Printed)		Ext.	Authorized by (Financial Officer)		Date	

Payments to individuals: U.S. Citizen/Permanent Resident YES NO
If no: The individual must complete the Foreign National Information Form (FNI Form). The department will send the FNI form to foreignnationals@smu.edu for HR and Payroll to review and make a determination. Please attach the FNI Form and supporting documentation, as well as a copy of HR's determination to the Payment Request Form.

Payments to non-individuals: U.S. Entity YES NO
If no: Please complete the Foreign Vendor Information Form and attach required Form W-8 and other documentation to the Payment Request Form.

DISTRIBUTION						
Description (appears in GL detail)	Amount	Acct (4)	Fund (2)	Org (6)	Subclass (5)	Project (7)
Total Payment Amount						

Special Approvals (Request must be signed by someone authorized to charge against the organization ID's referenced above)

Typed or Printed Name	Signature	Title	Date
Typed or Printed Name	Signature	Title	Date
Typed or Printed Name	Signature	Title	Date
Typed or Printed Name	Signature	Title	Date