



Non-PO Payment Request

BUDGET YEAR	EXPRESS CHECK (ADDITIONAL CHARGE)	SUPPLIER NUMBER (REQUIRED PRIOR TO SUBMITTING PAYMENT REQUEST)	VOUCHER NUMBER					
	<input type="checkbox"/> YES							
MAKE CHECK PAYABLE TO (NEW SUPPLIER - CONTACT SUPPLIER@CHAPMAN.EDU)			PERMANENT US RESIDENT (FOR TAX PURPOSES ONLY) <input type="checkbox"/> YES <input type="checkbox"/> NO					
MAILING ADDRESS (MUST BE FILLED OUT)								
CITY	STATE	ZIP CODE	FOREIGN PROVINCE					
SUPPLIER CONTACT NUMBER		SUPPLIER EMAIL						
INVOICE DATE	INVOICE NO./DESCRIPTION OF CHARGE	ACCOUNT	FUND	DEPT ID	PROGRAM	PROJ/GRANT	CLASS	AMOUNT
	PROVIDE BUSINESS PURPOSE BELOW:							
FS USE ONLY	CA TAX WITHHOLDING AMOUNT (IF APPLICABLE)							
FS USE ONLY	FED TAX WITHHOLDING AMOUNT (IF APPLICABLE)							
PREPARED BY		EXT.	DATE		TOTAL PAYMENT			
APPROVAL WILL BE LAUNCHED THROUGH WORKFLOW AFTER A/P ENTRY INTO PEOPLESFT						SPECIAL INSTRUCTIONS		