


Special Handling Requested	Check Box	Reason for Request				
		Dept Contact Name	for check pick-up at 221-			
* Must provide copy of Vendor Payment Form for Disbursements						
 WILLIAM & MARY Vendor Payment Request Form (VPRF) Department _____	DOCUMENT NUMBER					
	FOATEXT					
	PROCESSED DATE		INITIALS			
VENDOR / PAYEE INFORMATION			Check appropriate box	ADDITIONAL PAYMENT INFORMATION		
Purchase Order Number		<input type="checkbox"/> Please check box at left if Account Distribution changes are required.		Direct Pay (if not eVA exempt purchase, additional justification must be included)		
Banner ID Number				Reimbursement (if not eVA exempt purchase, additional justification must be included)		
Name				Honorarium		
Doing Business As				Wire Request		
Address				Foreign Draft Request		
				1099 Transaction		
INVOICE INFORMATION						
Invoice Number:		Amount:				
Date invoice was received:		Payment Due Date:				
Date goods were received:						
Description of the payment or purchase:						
Please Indicate if: <input type="checkbox"/>	Remittance ONLY when required by Vendor. (Department must provide copy)					
Prompt pay requires that invoices be paid within 30 days of receipt of goods or invoice, whichever is later.						
BANNER ACCOUNT DISTRIBUTION						
Banner Account Distribution	Index	Account	Activity Code	Amount		
VENDOR TYPE						
Vendor, Employee, Student Payment or other	US Source Vendor	Foreign Vendor	Vendor is a Student	Employee		
	Existing Vendor	Foreign Source Income	US Citizen/Legal Resident	Employees may only receive reimbursements. No other payments can be processed.		
	Prepayment - Use Only if payment crosses fiscal years.	Services were provided in the NRA Country	Scholarship / Fellowship		Stipend / Awards / Prizes	
		US Source Income	Reimbursement			
		Include TAX LETTER assessing taxation. You must request letter from the payroll office PRIOR to payment request.	Non-Resident Alien			
			Include TAX LETTER assessing taxation and reportability. You must request letter from the payroll office PRIOR to payment request.			
Department Approval Officials						
Person preparing form cannot authorize the disbursement.						
Person who Prepared Document		Phone Number				
Print Name of Agency Head or Designee		Document Date				
Signature Agency Head or Designee		Date				
Office of Sponsored Programs Approval						
The Sponsored Programs office ONLY needs to approve invoices for goods and services that were not approved prior to acquisition.						
Signature of OSP Administrator		Date				
Only ONE invoice may be paid per form. Complete the form, attach the original invoice, and send to Accounts Payable for processing. Keep a copy for departmental records.						