

1. Name of Payee:		2. Amt. Of Check:	
3. Permanent Address:			
4. Taxpayer Identification Number (check one): <div style="display: flex; justify-content: space-between;"> Form W-9 Attached Form W-8BEN/W-8BEN-E Attached (Foreign Vendor) </div> <div style="display: flex; justify-content: space-between;"> Not necessary (Form W-9/ W-8BEN is on file with UAF) Not Applicable For Reimbursement </div> <div style="display: flex; justify-content: space-between;"> Scholarship Payable to UAlbany Student Accounts: Student ID# </div>			
5. Description/Purpose of Disbursement:			
6. Reference: Check the appropriate box. If purchase order (PO) or invoice please indicate document number. <div style="display: flex; justify-content: space-between;"> Invoice #: Award-Scholarship-Honorarium: Reimbursement: </div> <div style="display: flex; justify-content: space-between;"> P.O. #: Other: </div>			
7. Account Name:		8. Account Number:	
9. Account Manager's Name & Title:		10. Campus Address & Phone Number:	
11. Account Manager's Signature:			
12. FOR REIMBURSEMENTS ONLY Signature of recipient attesting to expenses:			
13. FOR REIMBURSEMENTS TO ACCOUNT MANAGERS ONLY (See instructions on reverse) Signature from the Reporting Office:			
***** FOUNDATION USE ONLY *****			
G/L ACCOUNT CODE:		AMOUNT <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Authorization: _____ Date: _____ Voucher No.: _____ </div> <div style="width: 45%; border: 2px solid black; padding: 10px;"> <div style="text-align: center; font-weight: bold; margin-bottom: 10px;">PAID</div> Date: _____ Check No.: _____ </div> </div>	