

Payment Services Department 1200 E. California Blvd, MC 103-6 Pasadena, CA 91125 Hotline: 626-395-8900

Email: accountspayable@caltech.edu

Payment Request Form

Instructions:

Complete this form and attach all supporting documentation to justify the request. Please refer to the Payment Request Usage List and procedure at http://procurement.caltech.edu/policies_procedures Complete, print, and obtain appropriate approvals and submit this form and attachments to Payment Services for processing. You may email this form and attachments to accountspayable@caltech.edu Please allow 3 to 5 business days for processing this request.

Section 1 – Payment Information:											
Date: Date Required:		Supplier Name (Payee):									
Address:											
City:			State: Postal (al Code: Country:			Phone:		
Section 2 – Tax Reporting/Withholding Information:											
Is Payee a U.S. Citizen? Is Payee a			Caltech Student/Employee?			If Student/Employee, enter UII			Is	s Payee a California Resident?	
Do you expect to pay this payee more than \$1,500 per calendar year?								rice, where will the services be performed?			
Section 3 – Disposition of Payment:											
Note: FedEx bill including									requests must be accompanied by a fully completed air the PTA as to where the delivery cost is to be charged.		
Special Instructions/Note to Processor:											
Section 4 – Expense Distribution: Additional Expense Distribution Form available at http://procurement.caltech.edu/forms											
Invoice Date: Invoice Number:								Amount:			
Project / Task / Award / or GL#:								Expenditure Type (Required):			
Invoice Date:	voice Date: Invoice Number:							Amount:			
Project / Task / Award / or GL#:								Expenditure Type (Required):			
Invoice Date:	ne Date: Invoice Number:							Amount:			
Project / Task / Award / or GL#:								Expenditure Type (Required):			
Grand total								:			
Section 5 – Description/Justification:											
Section 6 – Requestor/Approver:											
Requestor Name:				Dept Name & Code: Ext:				Mail Code: E-Mail:			
Approver Name:				Approver Signature:						Date Approved:	