

Complete this form as a fillable PDF. Select the instructions link before completing. Scan and email the form and expenditure documentation to payables@txstate.edu.

VENDOR INFORMATION

Vendor Name: _____ SAP Vendor Number: _____
 Mailing Address: _____ City, ST Zip: _____

PAYMENT INFORMATION

Invoice Number _____
 Purchase/Service Date _____

ACCOUNT ASSIGNMENT

Fund _____
 Club Account Number _____
 Club Name _____

ALLOCATION

Amount	GL Account	GL Account Description & Additional Information Request
\$ -	729900	Payment of Services, Honorariums, Speakers
\$ -	740600	Rental of Equipment
\$ -	747000	Rental of Space
\$ -	770001	Cash Awards / Prizes
\$ -	773000	Reimbursements, Supplies, Registrations, Travel, Cash Advances
\$ -	TOTAL PAYMENT/REIMBURSEMENT	

PURPOSE OF PAYMENT (Describe who, what, why, where, when):

*NOTE: For cash advances, both the advisor AND the student receiving the advance must be aware of and comply with Section e. i. Cash Advances under 'ALLOCATION' on Page 2 of the AP-9 instructions (linked above).

CHECK PICK UP CONTACT INFORMATION

Contact Name: _____ Contact Number: _____

REQUIRED APPROVALS - Note: If the payee is an officer with payment authority, a second officer's signature is required.

Officer Name (Printed) _____ E-mail _____
 Officer Signature _____ Date _____ Phone _____
 Officer Name (Printed) _____ E-mail _____
 Officer Signature _____ Phone _____
 Advisor Name (Printed) _____ E-mail _____
 Advisor Signature _____ Date _____ Phone _____