

PAYMENT REQUEST

FORWARD TO: BUSINESS OFFICE
PERU STATE COLLEGE

Date of Request:							
Vendor:				SAP Vendor #:			
Address:				Federal ID #:			
				Vendor Type:	1	2	3
				1 - Sole Proprietorship 2 - Individual 3 - Corporation			
BATCH NUMBER	BATCH DATE			WARRANT NUMBER	PAID DATE		

INVOICE NUMBER	DOCUMENT NUMBER	INVOICE DATE	AMOUNT
Total Amount			

No Bids Necessary (**Under \$2,500.00**)

3 Bids Attached (**Over \$2,500.00**)

PURCHASE REQUESTED BY:	DEPARTMENT:
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I hereby certify that there are sufficient funds within the department from which this request is made, that the items listed are required for the functions of this department, and that the items are not of a personal nature. If the funds are derived from Federal or State Grant sources, I also certify the expenditure to be consistent with the grant terms and conditions. I also certify that the goods (and/or services) have been received.

PURCHASE APPROVED BY:	DATE:
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SAP BUDGET CODING BELOW TO BE COMPLETED BY THE DEPARTMENT		
SAP G/L Acct.	SAP Dwf i gy	TOTAL

APPROVED FOR PAYMENT:
BUSINESS OFFICE APPROVAL