



New Mexico State University Accounts Payable Direct Pay Request Form

Are you using sponsored awards or gifts on this form?

Yes - route to MSC SPA

No- route to MSC AFR

Document # _____

Section: 1 (Must be completed) REQUESTOR INFORMATION

Date (mm/dd/yyyy): _____ Department: _____ Campus Box: _____

Requestor: _____ e-mail Address: _____ Phone: _____

INSTRUCTIONS: USE THIS FORM FOR ALL PAYMENTS WHERE NO PURCHASE ORDER WAS ISSUED. (1) Compile all information on Request. (2) Obtain PI, Dean, Vice President, Community College President or their designee on original request. (3) Retain one copy of Invoice and Request for departmental files.(4) Forward original request with original invoices to Accounts Payable Box 3AP. If vendor requests a copy of the invoices to be returned with payment, forward an additional invoice copy or remittance invoice. (5) Original signatures are required only on the original Voucher. (6) ORIGINAL REQUEST AND ORIGINAL INVOICE BECOME PART OF NMSU PERMANENT FILES.

Banner ID: _____ **Payee:** _____

Remit To: _____
Name Address City, State, Zip

	Description of Goods or Services	Amount
1.	_____	\$ _____
2.	_____	\$ _____
3.	_____	\$ _____
4.	_____	\$ _____
5.	_____	\$ _____
Total from Continuation Page		\$ _____
Total		\$ _____

I certify that charges herein are correct and just and that payment therefore has not been received. (Signature of Payee must be in **Blue Ink**)

Payee Signature: _____

Index	Fund	Account	Travel Encumbrance/Or Subcontract Number	Amount	P/F

Section: 2 (Must be completed) APPROVAL

Print Name: _____ Signature: _____ Date: _____

Principal InvestigatorDean/VP/CC presidentDesignee

Section: 3 (Must be completed) CENTRAL OFFICE APPROVAL

Fiscal Monitor: Print Name: _____ Signature: _____ Date: _____

Section: 4 INTERNAL USE ONLY

Processed by: _____ Date: _____



New Mexico State University
Accounts Payable
Direct Pay Request Form (Continued)

Date: _____

Payee: _____

	Description of Goods or Services	Amount
6.	_____	\$ _____
7.	_____	\$ _____
8.	_____	\$ _____
9.	_____	\$ _____
10.	_____	\$ _____
11.	_____	\$ _____
12.	_____	\$ _____
13.	_____	\$ _____
14.	_____	\$ _____
15.	_____	\$ _____
16.	_____	\$ _____
17.	_____	\$ _____
18.	_____	\$ _____
19.	_____	\$ _____
20.	_____	\$ _____
21.	_____	\$ _____
22.	_____	\$ _____
23.	_____	\$ _____
24.	_____	\$ _____
25.	_____	\$ _____
	Total	\$ _____