Payment/Reimbursement Cover Form

COE CIS FTC
Attach to: Invoices, receipts, etc.

Please Check the box below that is appropriate for the action you are requesting and include all necessary forms

☐ Reimbursement (Non-travel)　　　☐ Direct Payment (attach invoice)　　　☐ Petty Cash Replenishment

☐ Speaker fees (to include Honorariums)*　　　☐ Wire Transfer (attach invoice)　　　☐ Awards/Prizes

*(If visiting speaker, lecturer, etc., obtain W9 (US vendors)/W8Ben (International); fax to 607-255-9786 and shred the original.)

☐ *Completed W9/W8-BEN has been faxed to FTC*   Date: _____

☐ Requesting FTC to obtain W9/W8-BEN (see contact information below)

Payee: _____　　NetID: _____

Address: _____

						Amount: _____
account number _Required_	sub-account	object code	sub-object	Project	org ref ID	

						Amount: _____
account number _Required_	sub-account	object code	sub-object	Project	org ref ID	

Alcohol? If Yes, provide unrestricted account:

						Amount: _____
account number _Required_	sub-account	object code	sub-object	Project	org ref ID	

Business/Research Purpose: Be specific.

Who, What, When, Where, Why:

i.e.: payment for speaker, Dr. George Smith, MIT, who presented a colloquium at the Theory Seminar on 1/15/12. (flyer attached)

If **meal** - list individual attendees or group name: staple attendance sheet for group meetings (if available) Please provide **attendees** full name and affiliation

NOTE: please provide itemized meal receipts

Preparer: _____　NetID: _____　Date: _____
(Individual Submitting form)

Department/Unit use only

Account Authorization: _____　NetID: _____　Date: _____

Print this form and attach to credit card receipt/invoice/etc. and forward to your Department/Unit. Department/Unit will forward to FTC Representative, 484 Rhodes Hall.

11/17/11