

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](mailto: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
\$ -	<b>TOTAL PAYMENT/REIMBURSEMENT</b>	

**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 \_\_\_\_\_