

Vendor Code		

Reason for Payment Reimbursement (Attachments Required)									Se	Service Date or Period					Transaction Code			
☐ Honorarium (Details listed below)															50			
Other													Department Phone					
Department Name							Depa	Department Contact						Jepartr	nent Pr	none		
Tech Contact							Tech	Tech Phone				Box Number						
STATUS (requ	ired	1)		Deite		Jeties ID	C Castian 6100 m		most resisionts	for comica			. I	J.S. Taxpayer	· ID Nur	mher	1099 Type	
		itizen		taxpa	ayer ident	ification n	C Section 6109 re umbers to payers	who n	nust report the p	ayments to	o IRS. IF	RS uses th	e	7.0. Taxpayor	ID ING	IIDCI	1033 Type	
=			nt Alie	n _{are r}	equired to	file tax re	n purposes. Payer eturns. Payers mu sh a taxpayer iden	st gene	rally withhold tax	kes from ta	axable pay	yments to	a					
1. Vendor/Clair		ent Ali : Name		payo	e who doe	33 1101 141111	on a taxpayer iden	uncauoi	Triumber to a pay	ver. Oertain	репанос	aiso appi	.					
2.																		
3. Permanent A	Addr	ess																
4																		
4.									VENDOR'S CERTIFICATE: I h						ereby certify that the items and arges for materials, merchandise			
5a. City	5a. City State						Zip			or serv	ices fur	nished to the	he University	of Was	hingtor	1.		
											Signature	9						
5b. Country (Fo	oreig	gn)									3							
Charlet Landling Instruction										DateSpecial Instructions								
Check Handling Instructions Mail to Permanent Address										peciai	ii isti ucti	OHS						
П	Hol	d for F	ick-up	: CalL_														
_																		
	Ser	nd to:																
			4. B	ox														
Detailed Description of Business Purpose of Expense (Require									equired)		Qι	uantity	Unit	Unit Pric	ce	Extend	ded Amount	
														SUBTOTA	AL ►			
										LESS \	W/H ▶			CHECK AMOUN	r ▶			
								ACCC	DUNTING DE	=TAII				7				
FUND	S	GE	NL LD	GR	COST	ACCOL	JNTING ONL	_	USE TAX	T	MOUN ⁻	т		INVOICE/			DATE	
BUDGET	/ L	OBJ	DBJ SUB	SSUB	TASK	OPTN	PROJECT	l Q	OOL IAX	"			REFERENCE NUMBER				PREPARED	
NUMBER	<u> </u>																	
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Preparer's Sigi	natu	re						Auth	norizina Offic	ial's Siar	nature				0	Check N	Number	
. Topalor o dignaturo							Authorizing Official's Signature						`					
Date Signed						Dat	Date Approved							Check Date				