



Direct Payment Request Form

In order to process your request, form must be properly completed, signed, funds available and attach approved invoice. Once ready for processing, please drop off to: FISCAL SERVICES - Building C - Room 203. If you have questions about the process, please call (626) 585-7451.

(For Accounts Payable Use Only)

Banner Invoice _____ **Vendor #** _____

Vendor _____

Address _____

City _____

State _____ **Zip** _____

Board Report Date: _____

Consent Item Number: _____

Description/Comment: _____

Invoice Date **Invoice Number** **Invoice Amount**

Fund	Org	Account	Prog	Amount

Authorized Signatures

Cost Manager

Today's Date

Budget Administrator

Today's Date