

NM ST UNIV New Mexico State University
Accounts Payable

Payment Request ([Payment Guidelines](#))

Instructions: Use this form for all payments in which vendor registration is not required. 1) Complete all information on request. 2) Obtain appropriate signature. 3) Submit a ticket in Aggie Service Desk and attach form and supporting documentation as applicable.

SECTION 1: REQUESTOR INFORMATION

Requestor Name: _____ Department: _____
Phone: _____ E-mail Address: _____

Click to view a list of payment type descriptions & usage details

[Enter a ticket in Aggie Service Desk](#)

1. Please read the form instructions.
2. Requestor is the person who prepares and submits the form.
3. Once the form and required documents are ready to submit → Click the link to **Enter a ticket in Aggie Service Desk**. Attach form and documents to the ticket.

SECTION 2: PAYEE INFORMATION (ALL INFORMATION REQUIRED)

Payee Aggie ID: _____ If no Aggie ID, enter NONE.
Payee Name: _____
Payee Email: _____ Payee Phone: _____
Payee Mailing Address (for receipt of payment): _____
Address City State Zip

For taxable payments, attach W-9 or other required tax forms as a separate file.

4. All Payee Information is required to avoid delayed payment.
5. If payee does not exist in Banner (no Aggie ID) enter NONE in this field, **Payee Aggie ID**.
6. See * below (in section 3) for which payments are considered taxable.

SECTION 3: PAYMENT TYPE (CHECK ONE) *TAXABLE - [SEE GUIDELINES](#)

Employment Related Payment (Include Student Employment)

Business Meals Reimbursement Mileage Reimbursement Other: _____

Student (Non-Employment Related)

Allowance/Participant Pmt./Stipend* - Taxable Consignment Sales* - Taxable Other: _____
(If for services, process through payroll)

Award/Prizes* - Taxable Travel Reimbursement/Mileage-[Attach Worksheet](#)

Other Payee (Not Paid to NMSU Student or Employee)

Allowance/Participant Pmt./Stipend* - Taxable Refund Centrally Initiated
 Award/Prizes* - Taxable Travel Reimbursement -[Attach Worksheet](#) Subcontracts EQ#: _____
 Honorarium/Guest Payment* - Taxable (candidate or non-vendor payment) Other: _____
 Livestock or Feed* - Taxable

I certify that charges herein are correct and that payment has not been received from any source.
Payee Signature, if required: _____

7. Select only one appropriate payment type. Note that Travel Reimbursements require a worksheet to be attached.
8. For payment types marked *-**Taxable** → Tax forms must be attached to the Payment Request as a separate file. See required tax forms for detail (hyperlink above).
9. Click the **SEE GUIDELINES** link to obtain detailed descriptions of the payment types/options.

SECTION 4: PAYMENT DETAILS

Business Purpose:

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Index	Fund	Account	Amount
Total From Continuation Page			
Total			

- 10. Provide a business purpose for the payment. Include dates if applicable.
- 11. Enter the accounting information.

SECTION 5: APPROVAL

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Printed Name: _____ Signature: _____ Date: _____

Principal Investigator Dean/VP/CC President Designee OR For Aggie Service Center Units Dept Head/Dir Principal Investigator (PI)

Note: If payee is PI, Dept Head/Dir or above, payee's supervisor's signature is required

- 12. The appropriate authority needs to approve by signing the payment request.