

Expenditure Request

Name of Fund _____ Fund # _____

Amount Requested \$ _____

Payee (as it should appear on check)* _____

Student Employee/GA Faculty/Staff Non-Employee

Individual UID# _____
(SSN required if service performed or awards. W9 form required if it's a new vendor)

Organization Tax ID (Required) _____

Address: _____

To Pay Expenses for: _____

Benefit to University: _____

Individuals Involved: _____

Date of Activity: _____ Location : _____

Explanation of
Expense (**Required**) _____

Mailing Instructions – check one

Direct Deposit

Pick Up Pick up by: _____ Ext: _____

Campus Mail To: _____

Mail Direct To: _____

Preparer (Name/Title/Phone/Email) : _____

Signature of Payee/Claimant: _____

Signature of Approver: _____ **Date** _____ **Name/Title:** _____

Second Approval: _____ **Date** _____ **Name/Title:** _____
(If required)

Approval signature certifies that the expense has been reviewed and complies with the justification noted in the "Benefit to University" section above.

IMPORTANT NOTE: The Foundation prints checks once a week and the normal turn-around time for an expenditure request is 7-10 business days after receipt by the Foundation.

If you have any questions, please email the University of Memphis Foundation at **Foundation@memphis.edu**.

For Foundation Use Only

Submit completed forms to
University of Memphis Foundation
Foundation@Memphis.edu