



**DIVISION OF FINANCE AND ACCOUNTING**  
**INVOICE/PAYMENT TRANSMITTAL FORM**

TO: **Vendor Payables**  
 Finance and Accounting, RP Suite 300

Vendor Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Vendor Address: \_\_\_\_\_ Dept. Name: \_\_\_\_\_  
 \_\_\_\_\_ Dept. /Proj#: \_\_\_\_\_  
 \_\_\_\_\_ Preparer: \_\_\_\_\_  
 \_\_\_\_\_ Phone#: \_\_\_\_\_

Is Vendor a US Citizen/Company? Yes \_\_\_\_\_ No \_\_\_\_\_

| Invoice/Receipt # | PO#   | Amount   |
|-------------------|-------|----------|
| _____             | _____ | \$ _____ |
| _____             | _____ | _____    |
| _____             | _____ | _____    |
| _____             | _____ | _____    |
| _____             | _____ | _____    |
|                   | TOTAL | _____    |

\_\_\_\_\_  
 Approver\*/Petty Cash Custodian  
 PRINT NAME

\_\_\_\_\_  
 Approver\*/Petty Cash Custodian  
 SIGNATURE

**NOTE: For use by departments in:**  
 - sending receipts for Reimbursement Other Than Travel (ROTT)  
 - sending Petty Cash Reimbursements  
 - approved pre-payments  
 - other related payment documents  
**If the payment must be wire transferred, complete and attach on-line Form 41-570.**

\*Approver must be on DAL.