

Use form only when PO or PCard cannot be used. Send the completed payment request with supporting documents to Rollins Hall, Accounts Payable or email invoice@odu.edu.

TO:	Accounts Payable		
FROM:		DEPARTMENT:	
DATE:			
SUBJECT:	AP Payment Request		
Vendor Information			
Vendor Name			
Vendor Number (Federal Tax ID Number)			
Vendor Mailing Address			