UNIVERSITY OF CALIFORNIA, SAN DIEGO

PAYMENT REQUEST

(Non-Payroll)

Payment to be Issued to & Mailing Address:			Date of Requ	est:	Disbursements Use Only Document Number		
Social Security Number/ Federal Employer Identificatio	For all payments to individuals or partnerships for rents, royalties, interest, fellowships personal services, etc. that are subject to income tax reporting, complete the						
Home Address if Different From Mailing Address			section below. Resident of California? Yes No				
		If alien, coun	try of resider	nce:	Visa Status:		
Is Payee a U.C. Employee? Yes Check Here if Employee Witho	Disbursements Use Only Special Approvals						
Explanation of Payment (UC P	urchase Order No., i	f applicable):		Amount: Tax Amount: (If applicable)	
DEPARTMENT NAME		PREPARED E	3Y	EXT.	MAIL CODE		
Į.						(Authorized Signature)	
INDEX	FUND	ACC	OUNT	JNT REFERI		AMOUNT	
FOR DISBURSEMENTS USE ONLY 1099 IND.:						TAX CODE:	

UC San Diego - FO2017
Retention: 5 year subject to Federal Contract or Grant Requirements