No. **DP**

DIRECT PAYMENT REQUEST
Millersville University

See reverse side for instructions on use of this form.

Submit the 1st copy of this form to the Accounting Office. Attach either an **original** invoice or **original** receipt. For memberships and subscriptions, attach the order or renewal form. **Do not input an on-line Requisition when using this form.**

Requestor Name _____ Requestor Department _____

Date Prepared _____

Payee Information

☐ Reimburse Employee

Name _____

SAP# _____
(if non-employee provide S.S.#)

check will be mailed to campus address

☐ Pay Vendor

Vendor Name _____

Vendor Address _____

_____

_____
City State Zip

Payment Information

Description: _____

_____

Amount: $ _____

Accounting Information:

Cost Center /WBS/Internal Order _____

GL Account/Commitment item _____

Approvals

I authorize payment and certify that this expense was incurred for appropriate University purposes.

Responsible Person/Financial Manager _____ Date _____

Other Approval (optional) _____

Copy 1 - Accounting
Copy 2 - Department

Instructions on Use of Direct Payment Request Form

This form should be used to request reimbursement or payment for the following items:

- Membership dues and subscriptions regardless of dollar amount. The membership/subscription order or renewal form must be enclosed with this form.

- Goods and supplies already received **up to $500** when the following conditions apply:

    - the vendor does not require a University Purchase Order form.
    - the item is picked up by the department or mailed/shipped to the department, and
    - the vendor invoice is sent to the department rather than Purchasing, or
    - an employee is to be reimbursed for items purchased.

  If the vendor will accept a purchase order number, provide the DP# at the top of this form. In all cases, ensure that the vendor includes the DP# on their invoice. For items mailed or shipped to the department, ask the vendor to include the Name, Department, Building and Room # on the invoice and shipment. Inform vendors that the University is exempt from sales tax.

- One-time repairs to equipment regardless of dollar amount if:

    - the item is not on a prepaid maintenance contract.
    - the department calls in the repair request to the vendor.
    - the repairs are made on campus, and
    - any necessary internal approvals are obtained.

  If a vendor will accept a purchase order number, provide the DP# at the top of this form. If the item must be sent to the vendor for repair, or the vendor requires a University Purchase Order form, process an on-line Requisition. If the item is on a prepaid maintenance contract, follow normal call-in procedures and do not use this form.

- Reimbursement for gasoline purchased for MU vehicles. Accounting Information does not need to be completed since it will not be charged to the department. Include date of trip in Description section.

- Disbursement from Agency Funds regardless of dollar amount.

DO NOT USE THIS FORM for travel reimbursement, services, honoraria, consultants, or any other item other than those specified above. **DO NOT USE THIS FORM** for any item in excess of $500 unless specified above. Employees are responsible for adhering to any additional internal departmental guidelines on use of this form and may be held personally liable for unauthorized or inappropriate commitments.

Contact the Purchasing Office in advance if you have any questions about the use of this form.