

I N S T I T U T E
for **A D V A N C E D S T U D Y**

Requisition for Payment"

For Faculty, Staff, Members and Visitors Only

Vendor No.:

Date:

Pay to:

Address:

Email:

Approved by (signature): _____

Amount:

To be charged to account number:

In payment of (Itemize):

REIMBURSEMENT METHOD: Direct Deposit **
(US Dollar Accounts Only)

Paper Check

** For Faculty, staff and members at IAS for longer than 60 days: I certify bank account information on file with Accounts Payable is still current (initial)

** All others requesting direct deposit: You must complete and attach Direct Deposit Request form which is located at www.ias.edu/campus-resources/working-at-ias/comptrollers-office/online-forms

If you do not complete and attach form you will receive paper check.

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Note: