

## **Mixed GL/PTA Payment Request Form**

## Instructions: This form is intended for requests with GL account or GL/PTA combination entries. Upload this completed template with supporting documentation through TechMart using the GL & Mixed GL/PTA Payment Request form.

Section 1- Payee Information:							
Date:	Date Required:	Supplier Name (Payee):	If Student/Employee, enter UIL		UID:		
Address:			City:	State:	Zip Code:	Country:	
Email Address:		Phone	Please select from the payment category below:				
Section 2-	Wire Instructi	ons (Finance Use Only)					
Beneficiary Name (If different from Payee Name):			Beneficiary Bank Name:				
Currency:		Bank Account Number	ABA Routing Number:				
IBAN:		Swift/BIC Code (International Use):					
Section 3-	Expense Dist	ribution:					
Project / Task	( / Award / or GL#:		Expenditure Type (Required for I	PTA)	Amount:		
Project / Task	( / Award / or GL#:		Expenditure Type (Required for F	PTA)	Amount:		
Project / Task	( / Award / or GL#:		Expenditure Type (Required for I	PTA)	Amount:		
Project / Task	Award / or GL#:		Expenditure Type (Required for I	PTA)	Amount:		
Project / Task / Award / or GL#:			Expenditure Type (Required for I	PTA)	Amount:		
Project / Task / Award / or GL#:			Expenditure Type (Required for I	PTA)	Amount:		
Project / Task / Award / or GL#:			Expenditure Type (Required for F	PTA)	Amount:		
Project / Task / Award / or GL#:			Expenditure Type (Required for F	e Type (Required for PTA)		Amount:	
Project / Task / Award / or GL#:			Expenditure Type (Required for F	PTA)	Amount:		
Project / Task / Award / or GL#:			Expenditure Type (Required for F	PTA)	Amount:		
Project / Task	( / Award / or GL#:		Expenditure Type (Required for F	PTA)	Amount:		
					Total:		
Section 4- Description/Justification:							
Section 5-	Requestor/Ap	prover:					
Requestor Na			Dept. Name:		Extension	1:	
Approver Name:		Approver Signature:			Date Approved:		