

Payment Information

Date

Payee

(If new vendor, fax/hand deliver completed [PDR](#) to A/P.)

Payee Address

Amount

Type

Purpose and Special
Payment Instructions

*Membership/ Subscription Designated for:

Account Number	Organization	Activity	Natural Acct	Endeavor	Fund	Function	Reserved
							0000

Comment

Authorization

Preparer	<small>Please Print</small>	Phone Extension
(*Active SDSU Employee with Oracle Access)	<small>Signature</small>	Date

ALL FAH APPROVAL WILL BE DONE THROUGH ORACLE

Payment authorization is in accordance with the SDSU Fiscal Authorization Hierarchy (FAH)

All university payments are mailed unless *direct deposit* is requested

Return completed form to:
 SDSU · Accounts Payable · 5500 Campanile Drive · MC-1611 · AD-116 · San Diego CA 92182
 Phone (619) 594-0894 · Fax (619) 594-4917
 Or
 Email completed form as PDF ATTACHMENT ONLY to sdsuapinv@sdsu.edu
 as Ingestion Email does not accept secure documents submitted through AdobeSign.
 Forms routed through AdobeSign please enter final email to accountspayable@sdsu.edu
Please do not email Supplier Information Form (PDR)