

Payment Authorization

Middle Tennessee State University • Murfreesboro

Department		Department Payment Authorization Number	Special instructions for Handling and/or Mailing
	Enter Department Name Here		
	Department Head (signature)*		
	Department Head (typed or printed)	Date (mm/dd/yyyy)	
Dean/ Vice President	Dean/Vice President (signature)*		
	Dean/Vice President (typed or printed)	Date (mm/dd/yyyy)	

*By signing, I certify that all MTSU policies for procurement have been followed, that all goods and/or services, and any applicable pricing, terms, and conditions concerning the attached invoice/document are correct and have been received and are in an acceptable condition.

	VENDOR	DESCRIPTION	BANNER INDEX NUMBER	EXPENSE ACCOUNT CODE	AMOUNT APPROVED FOR PAYMENT
Vendor Name					
ID#, FIEN, or SS#					
Address:					
Street Line 1					
Street Line 2					
Street Line 3					
City					
State or Province					
Zip					
Nation (if not U.S.)					



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MTSU is an equal opportunity, non-racially identifiable, educational institution that does not discriminate against individuals with disabilities. BF037-0206

Balance from last authorization/requisition	\$
Adjustment	\$
Total available	\$
This authorization	\$
Balance carried forward	\$