

# **PAYMENT REQUEST FORM**

Registered Student Organization (RSO) Instructional. For questions contact [safsupport@gsu.edu](mailto:safsupport@gsu.edu).

## **WHEN IS THE PAYMENT REQUEST FORM USED?**

To request payment using funds from an RSO's student activity fee budget allocation. To submit with purchase reconciliation that require payment processing for:

### Non-Employee Packets

- Payment Request Form
- Invoice

### Company Packets

- Payment Request Form
- Invoice (not a Quote), Packing Slip, Receipt/Delivery
- Proof of Payment (i.e., receipts, bank statement, invoice, packing slip, receipt/delivery confirmation, artwork proof, etc.)
- PIN advertisement & attendance

### Reimbursement Packets

- Payment Request Form
- Proof of Payment (i.e., receipts, bank statement, invoice, packing slip, receipt/delivery confirmation, artwork proof, etc.)
- PIN advertisement & attendance
- Non-GSU address delivery memo (if needed)
- Delivery address must be on the submitted receipt/invoice

## **WHEN IS THE PAYMENT REQUEST FORM NOT USED?**

To request payment for business transactions conducted with GSU Campus Partners such as: Panther Dining, Student Center, Bookstore & Pawprints. Invoices from Campus Partners will be directly charged to the RSO's budget award allocation.

## **PAYMENT REQUEST FORM FIELD REQUIREMENTS**

### **Purchase Request#:**

Include pre-approved PIN purchase request number.

### **Expense Type (Select a box):**

The payment request form is divided into two sections reimbursement & vendor payment. Select the most appropriate based on expense type.

- Reimbursement: When personal or organizational funds were used.
- Vendor Payment: When business was done with a non GSU vendor for goods received or services provided.

### **Full Name of Registered Club/Organization:**

Enter full student organization or club name (no acronyms).

### **Faculty/Staff Advisor:**

Provide the name of your RSO faculty or staff advisor.

**Is the reimbursee a Georgia State University faculty, staff, or student?**

Check either "Yes" or "No." If "Yes," complete only Section 1. If "No" complete only Section 2.

**Is the reimbursee a U.S. Citizen or Permanent Resident Alien (Green Card Holder)?**

Check either "Yes" or "No."

**Organizational funds were used for the purchase?**

Check either "Yes" or "No." If "Yes," skip to Section 2. Do not fill out Section 1.

**SECTION 1: REIMBURSEMENT SECTION**

**Legal Name:**

Enter the legal name of the individual seeking reimbursement.

**Address:**

Provide the address of the individual seeking reimbursement.

**Panther ID#:**

Enter the Panther ID number of the individual seeking reimbursement.

**Email address:**

Provide the email address of the individual seeking reimbursement.

**Reimbursement Amount:**

Specify the amount being requested for reimbursement.

**Description of Expense:**

Describe the expense detailing the request for reimbursing the individual. Include relevant information (i.e., purchase dates).

**SECTION 2: VENDOR PAYMENT SECTION**

**Vendor Being Paid:**

Enter the name of the vendor or entity to whom the payment will be made.

**Amount Due to Vendor:**

Specify the amount due to the vendor or entity.

**Date of Expense:**

Indicate the date on which the expense was incurred.

**Description of Expense:**

Describe the expense detailing the request for issuing payment to the vendor. Include any relevant information.

**Invoice Number:**

Enter the invoice number associated with the expense (if applicable).

# REGISTERED STUDENT ORGANIZATION PAYMENT REQUEST

*\*Required fields\**

**Purchase Request#**

Expense Type (Select a box):  Reimbursement  Vendor Payment

\*Full Name of Club/Organization: Peanut Butter & Jelly Club

\*Faculty/Staff Advisor: Sarah Advisor

Is reimbursee a Georgia State University faculty, staff, or student? (If yes, complete only section 1) Yes  No

Is reimbursee a U.S. Citizen or Permanent Resident Alien (Green Card Holder)? Yes  No

Organizational funds were used for the purchase? (If yes, skip to section 2) Yes  No

## SECTION 1: REIMBURSEMENT INFORMATION

\*Person Being Reimbursed: Joe Panther  
(Legal Name)

\*Address: 55 Gilmer Street, Atlanta, GA, 30303

\*Panther ID#: 002-11-1100

\*Email address: jpanther22@student.gsu.edu \*Reimbursement Amount: \$ 84.53

\*Description of Expense: Pizza for PB&J Club Speaker Series. Promotional items for Student Organization Involvement Fair

## SECTION 2: VENDOR PAYMENT INFORMATION

\*Vendor Being Paid: \_\_\_\_\_ \*Invoice Number: \_\_\_\_\_

\*Amount Due to Vendor: \$ \_\_\_\_\_ \*Date of Expense: \_\_\_\_\_

\*Description of Expense: \_\_\_\_\_

PIZZA HUT  
CARRY\_OUT

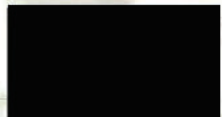
Ticket # 0003

Item Count: 4

ENTERED BY  
moo:2

12/11/18

10:55AM



:1ST INT ORD

01	1	\$FiveLU Hand toss Cheese Pepperoni	11.48
02	1	\$FiveLU Hand toss Cheese Pepperoni	11.48
03	1	\$FiveLU Hand toss Cheese	9.99
04	1	\$FiveLU Choc Chip	5.99
		COUPON (F6)	18.94
		Subtotal	20.00
		SALES TAX	1.60
		Balance Due	21.60

NO REFUNDS  
WE ONLY GIVE STORE CREDITS

Chance To Win \$1000  
CODE: q2f9 v8e1 8c6

We'd Love To Hear About Your Experience.  
Enter The Code Above For A Chance to Win!

tellpizzahut.com

Love Free Pizza?  
JOIN HUT REWARDS

Earn Points Toward Free Pizza Every Time

SEE BACK OF RECEIPT

SEE BACK OF RECEIPT FOR AN OFFER

SEE BACK OF RECEIPT FOR AN OFFER

SEE BACK OF RECEIPT FOR AN OFFER

SEE BACK OF RECEIPT FOR AN OFFER

SEE BACK OF RECEIPT FOR AN OFFER

PIZZA HUT# 026397  
9111 e douglas  
Wichita KS 67207  
(000)000-0000  
**SALE**

Server:  
12/11/18  
V

Ticket #3  
10:55 AM

APPR CODE: 011955

Invoice #3

AMOUNT: 21.60

TIP: \_\_\_\_\_

Total: \_\_\_\_\_

I agree to pay above total amount  
according to card issuer agreement.

Signature \_\_\_\_\_

**Customer Copy**

NO REFUNDS  
WE ONLY GIVE STORE CREDITS

SEE BACK OF RECEIPT FOR AN OFFER

SEE BACK OF RECEIPT FOR AN OFFER

SEE BACK OF RECEIPT FOR AN OFFER

# Fall 2020 Student Involvement Fair



## Date and Time

Wednesday, September 16 2020 at 9:00 AM EDT to

Thursday, September 17 2020 at 11:45 PM EDT

Add To [Google Calendar](#) | [iCal/Outlook](#)



## Location

Online

<https://pin.gsu.edu/event/6376276>



Results Details eReceipt Details

# Walmart

Save money. Live better.

( 561 ) 223 - 4357  
MANAGER ERIC GARNER  
2765 10TH AVE N  
PALM SPRINGS, FL 33461

ST# 05882	OP# 009047	TE# 47	TR# 07015	
REESES PB HT	003400066634	F	3.48	X
MMS CANE	004000049847	F	2.00	X
FRSK TT VP	005000096446		11.28	X
12CT TISSUE	075103253195		0.98	X
PPR GFT SACK	007162354266		0.25	X
PPR GFT SACK	007162354266		0.25	X
GIFT BAG	001869711376		0.98	X
BAG I/G	076379517643		0.98	X
VAL SACK	084277405243		0.98	X
REESES/6PK	003400047604	F	3.88	X
CONV HEARTS	004142001960	F	1.00	X
SOUR PATCH	007046209835	F	0.98	X
CANDY	007046208251	F	0.98	X
BOOK	978141972344		9.76	X
THEATER BOX	007097047100	F	0.98	X
SOUR PATCH	007046209835	F	0.98	X
VAL CANDY	003400012683	F	3.24	X
WH BS PRETZL	002685184133		2.14	X
SOOCT SWAB	068113112221		1.94	X
SV MSE CURL7	007940012199		2.94	X
BARS	060265217030	F	1.24	N
PET TREATS	068113112502		0.96	X
POWERADE	004900005034	F	0.80	X
SH3 STK CK 5	002310011781		1.58	X
PAPER TOWELS	007874204017		3.64	X
BANANAS	000000004011KI			
1.29 lb	1 lb /0.56		0.72	N
	SUBTOTAL		58.94	
TAX 1	7.000 %		3.99	
	TOTAL		62.93	
	CASH TEND		101.08	
	CHANGE DUE		38.15	

# INSERT ATTENDEE LIST FROM CHECK-IN APP

