

## Walters State Community College Accounts Payable Disbursement

**FID/SSN (required)** \_\_\_\_\_

**Vendor Name (required)** \_\_\_\_\_

**Street Line 1 (required)** \_\_\_\_\_

**Street Line 2** \_\_\_\_\_

**Street Line 3** \_\_\_\_\_

**City State Zip (required)** \_\_\_\_\_

**Vendor Number** \_\_\_\_\_

**Note: Invoice Indicator is used to determine how many checks a vendor will receive**  
**Many = One check for many invoices      One = One check per invoice**

|                     |                      |                      |
|---------------------|----------------------|----------------------|
| Invoice Indicator   | Many _____ One _____ | Many _____ One _____ |
| Vendor Invoice Date | _____                | _____                |
| Due Date            | _____                | _____                |
| Bank Code           | _____                | _____                |
| Vendor Invoice      | _____                | _____                |
| 1099 Payment        | Yes _____ No _____   | Yes _____ No _____   |

|             |       |       |
|-------------|-------|-------|
| Description | _____ | _____ |
| Amount      | _____ | _____ |
| Chart       | _____ | _____ |
| Index       | _____ | _____ |
| Fund        | _____ | _____ |
| Org         | _____ | _____ |
| Account     | _____ | _____ |
| Program     | _____ | _____ |
| Activity    | _____ | _____ |

**Distribution Methods:**

Mail Check \_\_\_\_\_

Call When Ready ext \_\_\_\_\_

Send to off-campus site \_\_\_\_\_

Prepared By \_\_\_\_\_

Approved By \_\_\_\_\_

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