



Campus Assemblies Direct Payment Authorization

This is a fillable PDF. Complete entries before printing on each use. Handwritten entries may be rejected. For a list of subaccounts applicable to your assembly see: <http://assembly.cornell.edu/Main/PaymentForms>

Section 1 – Agent of the assembly completes this section and submits to address provided above

Assembly/Account Subaccount

Vendor Information

Vendor Name Vendor Phone

Vendor Address Vendor Email

Vendor Web

Expense Information

Expense Amount Expense Date

If expense amount exceeds \$500, attach a contract negotiated between the organization and the vendor. Allow two weeks for processing if contract is not a standard form provided by the office. If \$500 or less, attach an invoice or quote detailing expenses.

Pages Attached

Payment Method

Business Purpose

If "Other" Purpose

Certification

The President/Chair or Financial Officer of the Assembly must sign below to authorized the expense. The undersigned affirm: the information provided above and attached documents accurately represent a complete agreement between the organization and the vendor for specified expenses; the specified expenses conform to the terms under which associated funds were authorized and payment will be applied solely toward those expenses.

Officer Name (print) Officer Name (sign) _____

Section 2 – University completes this section – ALLOW ONE BUSINESS DAY FOR PROCESSING

Cornell University will pay up to \$ _____ to the vendor as specified above and in attached documents from funds allocated to the organization. If the organization has an independent status, such payment may not utilize the university's tax exempt status and the university will not be a party to any agreement involving the vendor. This agreement is valid only if vendor fulfills the specified agreement, invoice or quote *and* submits a bill that is received at the address provided above before the expiration date below.

Authorized signature _____ Expiration date _____ PE # _____

Section 3 – Vendor instructions – ALLOW THREE BUSINESS WEEKS FOR PROCESSING

To obtain payment, mail or fax this completed form along with billing invoice and payment instructions to the location specified to the right. If mailed, completed form must be received within one week of the expiration date specified above. Email submission will result in faster payment processing.

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