

## PAYMENT REQUEST

ATTACH ORIGINAL SUPPORTING DOCUMENTATION, INCLUDING INVOICES, RECEIPTS, AND/OR FLYERS

FORM MUST BE FILLED OUT ELECTRONICALLY AND SIGNED

TAP USE ONLY D	ATE PRI	NTED:		ACCOUN'	Γ BALANCE:			PEID:	
PAYMENT INFORMATION	1								
							0	INDIVIDUAL	CORPORATION/
VENDOR NAME					DATE				LLC
STREET ADDRESS			CI	TY			STATE	ZIP	
ACCOUNT INFORMATION	1								
TORO AUXILIARY PARTNERS ACCOUNT #				OBJECT COD	E		AMOUNT	Γ CHARGED TO	O THIS ACCOUNT
TORO AUXILIARY PARTNERS ACCOU	JNT #			OBJECT COD	Ε		AMOUNT	Γ CHARGED TO	O THIS ACCOUNT
TORO AUXILIARY PARTNERS ACCOU	INT #			OBJECT COD	)F		ΔΜΟΙΙΝ	CHARGED TO	O THIS ACCOUNT
TORO NOMEDIANT TANKTHERS NOOS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			050201 005	_		701100111	i cimilozo i	3 11113 ACCCOUNT
TORO AUXILIARY PARTNERS ACCOU	INT #			OBJECT COD	Œ		AMOUINI	CHARGED TO	O THIS ACCOUNT
TORO AUXILIART PARTNERS ACCOU	JINI #			OBJECT COL		AMOUNT	AMOUN	CHARGED IV	J THIS ACCOUNT
					TOTAL	AMOUNT			
DESCRIPTION/JUSTIFICA		TIEIC : TIO : 1 OF TI	.= =\/s		<b>(6)</b>				
PLEASE PROVIDE A DESCRIPTION	)N/JUS	TIFICATION OF TH	1E EXP	PENDITURE	(5)				
DAVAGAIT DISTRIBUTION	V 005	FEDERICES							
PAYMENT DISTRIBUTION				T. D. 05516	O DISK UD				
OMAIL TO ADDRESS ABOVE	0	EFT/DIRECTPAY	O	TAP OFFIC CARD	E O PICK UP	NAME			EXTENSION
FOR QUESTIONS REGARI	DING	ΤΗΙς ΒΑΥΙΛΙΕΝΊ	r RFO	DUEST TO	ORO ALIYILIAR	OV DARTI	VERS SI	HOULD C	ONTACT:
TON QUESTIONS REGARD		ITIIS FATIVILIVI	ALQ	QUEST, TC	NO AUXILIAI	VI FAIVII	VLN3 31	TOOLD CO	JNIACI.
NAME	FA	IAIL			EXTENSION DEPA	ARTMFNT			
		nts, amounts over \$7	50.00 m	nust receive D			o Authoriz	ed Account Sid	aner approval)
SIGNATURES									
AUTHORIZED ACCOUNT SIGNER		DATE			AYEE'S SUPERVISOR			DATE	
No monies necesia sienen		DATE							
DEAN/V.P. APPROVAL		DATE			PAPERWORK DE	ADLINE:		PAYMENT   BY:	READY
DEWIN THE PROPERTY		DAIL			IN BY NOON TU	JESDAY		FRIDAY @	4PM
TORO AUXILIARY PARTNERS APPROV	'AL	DATE							Last Updated 4/19/20