

PAYMENT REQUEST FORM

Association for Information Science & Technology

Use one form per Payee

Payable To: Address: Email:	Payment Method: Check (ensure complete address included) Paypal to ID: _____ Via Bank Transfer to: Bank Name Swift ID Bank ABA IBAN/Acct: Payee Phone
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Today's Date:

All requests must be accompanied by receipt or written justification/documentation of expense.

Payee Name	Amount	Purpose	SIG/Chapter
Total Due to Payee:	\$		

Additional explanation, if required:

Signature of Requester

Executive Director Approval: