University Shared Services

REQUEST FOR PAYABLES PROCESSING

Please fill out all information below and attach this cover sheet to applicable support documentation and email to: musharedservices@missouri.edu. For processing a payment request, requisition, etc.

Dept Contact: **Date:**

Dept Name: **Phone:**

Dept Address: **Dept Ship to Code:**

Supplier Name: **Supplier Id:**
                                                                                                              If unknown, please provide supplier's email:

Supplier Address:

                                                                                                              Name of Custodian:
                                                                                                              If using capital PS account.

Amount: **PS Account:**

MOCODE: *If split funded put amounts and MOCODEs in request details*

Does this purchase exceed $10,000? If yes, you **MUST** have the following submitted with payment request:

- Sole source justification (SSJ) - Email MU Shared Services (musharedservices@missouri.edu) for form.
- Competitive bids or proposals are required unless items/services are already on contract with the University.

Does this purchase require IT approval?

- If yes, COLUM & UMSYS you MUST complete the **IT security & Requirements Questionnaire (ITSRQ).**
- If yes, for UMSL, you MUST complete the **Technology Purchase Request** (UM Policy 12004).

Request Details:

Request Purpose: Include the "why" for the purchase