

**CHECK OR CREDIT CARD
PAYMENT REQUEST**

*Carnegie Institution of Washington
Department of Terrestrial Magnetism*

(See corresponding line-item instructions on reverse side, page 2)

- DTM CHECK -

A. Issue a Check for (\$): **B.** Date check is needed:
(allow 3 business days)

C. Payable to:

D. Address:

E. Tel.# / Fax # / Email:

F. For Payment of:
(include purpose and end-user(s) location)

G. Project to Charge:

H. Business Office to Mail Check: **I.** Return Check to Requestor:

J. Signature of Requestor and Date:

- DTM CREDIT CARD -

K. Order Placed by: **L.** Card Type: VISA AMEX
 Home Depot Sears

M. Amount of Charge (\$): **N.** Date of Order or Charge:

O. Name of Vendor:

P. For Payment of:
(include purpose and end-user(s) location)

Q. Project to Charge:

R. Signature of Cardholder and Date:

S. BUSINESS OFFICE USE

Project Account Number	Amount
<input type="text"/>	<input type="text"/>

Chk. Num.:

Chk. Date:

Approval:

Instructions for Check or Credit Card Payment Request

When form fill-in is done on a computer, the process of entering data may be more user-friendly by either using the tab key for advancing to the next entry box, or by using the traditional mouse pointer and click method.

If requesting a check payment, complete A-J. If requesting a DTM credit card payment, complete K-R. An invoice or other supporting evidence that validates the dollar amount and vendor to be paid must accompany this request.

A. Enter the dollars-and-cents amount of check payment request.

B. Enter the date that check is required, allowing three (3) business days for processing.

C. Enter the full name of vendor or person.

D. Enter the complete address of vendor or person.

E. Enter the contact numbers or email address of vendor or person.

F. Enter the intention details for this check payment request.

G. Enter the project number or describe where the expense is to be charged.

H. Check this box if check payment is to be mailed by the Business Office.

I. Check this box if check payment is to be returned to the Requestor.

J. Requestor to sign and date form.

K. Employee who is placing order.

L. Check one of the boxes for the type of credit card used.

M. Enter the dollars-and-cents amount of vendor's corporate charge.

N. Enter the charge date of purchase.

O. Enter the full trade name of vendor.

P. Enter the intention details for this credit card payment request.

Q. Enter the project number or describe where the expense is to be charged.

R. Cardholder to sign and date form.

S. Business Office use.