



The Research Foundation for

The State University of New York

Request for Advance Payment for US Bank Cards

PI Information

PI Last Name _____ First Name (Full) _____ MI _____

Campus Email Address _____

Vendor Information

Vendor US Bank _____ Card Type (PI Input) _____

Supplier Number 358543 _____ Supplier Site (SPS Input) _____

Advance Payment Details - US Bank Cards

Project-Task-Award to be Charged _____ IRB Expiration Date _____

Department Contact _____ Department Address _____

Department Phone # _____

Request Date	Purpose of Advance (Including Disbursement Timeframe)	Amount
Total Request		\$

PI Certification

Certification:

I certify that the above is just, true, and correct. I confirm that a summary of cards disbursed (subject identifier, dollar amount, and date) will be provided to SPS and any unspent funds will be returned.

PI Signature _____

Date Form Completed _____

Please Forward Completed Form to SPS via UB Box

UB Box: <https://buffalo.app.box.com/f/2bd918c918084a82bdcbd4260685f118>

Business Office Use Only		
US Bank Card Request - ACH		
Supplier Number 358543	PO Number	Date Paid
Invoice Number	Expenditure Code	Approved By (Signature & Date)
Comments		