

TAXABLE PAYMENT

ACCOUNTS PAYABLE STUDENT PAYMENT REQUEST

Do not use this form for Employee/Student Expense Reimbursements.

Use this form for the following taxable payments:

Extra-curricular Positions:

OTHER

Event _____

Location _____

Start Date _____ & End date _____

Other taxable payments: Non-compensation payments/grants to cover living expenses, supplies, travel for activities that benefit the student (rather than St. Olaf) while learning, studying or gaining experience.

PAY TO : _____ One time pmt DUE DATE: _____

REQUESTED BY: _____ PHONE _____ DATE: _____

IS THE PAYEE OR BENEFICIARY OF THE PAYMENT A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN:

___ Yes ___ No *If no, please contact the Assistant Controller.*

NOTE: It is absolutely necessary to include Co, unit, and account on each form.

Co(3)	Unit(5)	Account(5)	Activity	Sub-Acct(4)/Category(3)		
_____	_____	_____	_____	_____	One time Pmt	\$ _____
_____	_____	_____	_____	_____	Total Recurring Pmts	\$ _____

Recurring payment information:

\$ _____ per month No. of months _____ Months _____ to _____

TOTAL \$ _____

APPROVED BY: _____ DATE: _____

Instructions: Print this form, sign and send original to Accounts Payable, and a copy of the completed form to the Financial Aid Office.

Deadline: Return to Accounts Payable by 5:00 pm Tuesday.