



Office of Student Life and Services

Clubs and Organizations



“Funding Request Submission for Products and Services (Non-Travel)”

Chartered and recognized clubs and organizations have the opportunity to submit funding request to the Division of Student Affairs, Office of Student Life and Services. Funding request must include the following:

- ✓ A Direct Voucher Payment Request Form aka Form 440.

UNIVERSITY OF THE DISTRICT OF COLUMBIA 1851

DIRECT VOUCHER PAYMENT REQUEST

REQUEST DATE PAYMENT DUE DATE

A. VENDOR INFORMATION

BANNER VENDOR NO. (N#)	DELIVERY INSTRUCTIONS (Leave blank if same as vendor information)
VENDOR NAME	
ADDRESS	
CITY, STATE, ZIP CODE	

B. VENDOR STATUS (CHECK ONE OPTION)

☐ BANNER NEW VENDOR (W-9 FORM MUST BE SENT TO PROCUREMENT)

☐ BANNER EXISTING VENDOR

C. PAYMENT TYPE (CHECK ONE OPTION)

☐ REGISTRATION FEES ☐ STUDENT STIPENDS ☐ HONORARIUMS ☐ LEASE ☐ INSURANCE ☐ OTHER (Specify)

☐ MEMBERSHIP DUES ☐ STUDENT TRAVEL ☐ MOU ☐ UTILITIES ☐ LEGAL ☐

D. PROPER SUPPORTING DOCUMENTS ☐ YES ☐ NO

E. BUDGET (FOAPAL)

FUND	INDEX	BANNER ACCOUNT CODE	DESCRIPTION	AMOUNT

- ✓ Direct Voucher Payment Request Form must include: Vendor Information; Delivery Instructions; Vendor Status; Payment Type; Proper Supporting Documents; Description; Amount; and Club Advisor, Club President and Treasurer Signatures.

Proper Supporting Documents must be a quote of goods/services as noted in the funding request. If vendor of funding request is not a university-approved vendor, a University Vendor Application and W-9 with a vendor telephone number must be included in funding request.

**THE UNIVERSITY OF THE DISTRICT OF COLUMBIA
VENDOR APPLICATION FORM**

This information is required so that (1) Business, or (2) Individual, may be placed on the District of Columbia Government data base. **Please print clearly** the information pertaining to you.

Please complete and return Taxpayer Identification Number and Certification (W9) Form along with the information listed below: **PLEASE DO NOT USE P. O. BOX NUMBER FOR MAIN ADDRESS**

BUSINESS

1. Company Name: _____

Contact Person: _____
PLEASE PRINT NAME

Telephone Number: _____

Fax Number: _____

Payment Address: _____
Street No. _____
City, State and Zip Code _____

Tax Payer Business: _____
Employer Identification number _____
AND _____
Dun and Bradstreet number _____

W-9
Form (Rev. October 2007)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Name (as shown on your income tax return) _____

Business name, if different from above _____

Check appropriate box: ☐ Individual/Sole proprietor ☐ Corporation ☐ Partnership ☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ☐ Exempt payee ☐ Other (see instructions) _____

Address (number, street, and apt. or suite no.) _____

City, state, and ZIP code _____

List account number(s) here (optional) _____

Requester's name and address (optional) _____

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply.

- ✓ It is imperative that funding requests be submitted to the Office of Student Life and Services thirty (30) days or more in advance for a non-travel related funding request. Travel-related funding requests must be submitted to the Office of Student Life and Services within sixty (60) or more days of anticipated travel. See “Submission of Travel Funding Request” for additional information, located in the “How To” Section of the Student Life and Services Website, www.udc.edu/student_life.

Funding requests are approved by the Undergraduate Student Government Association (USGA) and Office of Student Life and Services if funding request is allocated from club/organization budget award or the USGA directly. All funding requests must be approved by the Associate Vice President for Student Life and Services and/or Vice President for Student Affairs. Clubs and organizations will receive written notification of funding request status.