

Request for UMW Foundation Funds (RFF)

Include the following when preparing the request form:

- ✓ Department name and date of request
- ✓ Payee and mailing address are **required**.
- ✓ Email address is **required** to set up vendor in our system. Within the system, the payee will be able to turn in their W-9 as well as set up their ACH for direct deposit.
- ✓ Description and Business purpose: A full description of purpose and program is needed
- ✓ Project Code and Amount (The project code is the 4 digit account #) If you know the Fund, Account, and Department, please complete, otherwise the Foundation will complete.
- ✓ Please sign the request and complete to whom the form should be sent for approval. Please **do not** email this form to your supervisor.
- ✓ Please email all backup, including scans of Original receipts and Original invoices with this form to **umwf-accounts payable@umwf1908.org** in one file.

Please Note:

INCOMPLETE FORMS WILL BE REJECTED

Requests to reimburse the University must specify the fund, organization, account and program numbers (FOAP) at the University to insure proper credit • Foundation funds may not be used to reimburse University credit card charges nor to purchase Gift Cards.

Requests received older than 90 days will be rejected and unpaid without prior authorization from the Foundation.

Payment:

A minimum of two weeks must be allowed from the time the form is submitted to the time a funds will be received. Please plan accordingly.

If funds are needed in a shorter time frame, contact the Foundation Accounting Office @ ext. 2080 or ahodges@umwf1908.org, to see if other arrangements are possible.

Date: Department: Vendor Name or First/Last Name:

Address: City: State: Zip: Email:

Description: Business Purpose:

Project and Amount are required for completion.

Total Amount Requested: Account: Project: Amount: Fund: Department: Signature of Requestor:

Calculated- Do Not Enter

Amount Here

Who does this form need to be routed to for Approval (Please type your response): Dean/Director/Dept. Chair/Supervisor:

Executive Director/Assistant Vice President:

Cabinet Member (if over \$1,000 or otherwise required):

Please email this form and all of the original backup as one file to: umwf-accounts payable@umwf1908.org