## DIRECT PAY REQUEST (DPAY)

### Instructions

**PLEASE STAPLE THIS FORM TO FRONT OF INVOICE (if available)**

**STOP**

Could this purchase be paid for with a corporate Amex card? ($<5000) rather than this DPAY request?

Invoices ≥ $1000 should be processed against a PO

Northeastern Univ. Accounts Payable (177HU - 820) ext. 2652

NORTHEASTERN UNIV TAX-EXEMPT NUMBER IS:  04-1679980

ADDRESS SHOULD BE THE REMIT TO ADDRESS ON THE INVOICE

A. **INVOICE # AND DATE DIRECTLY FROM THE INVOICE**

   1. USE INVOICE DATE AS INVOICE # (format as MMDDYY)
   2. IF NO INVOICE DATE, USE DPAY DATE (format as MMDDYY)
   3. IF SUBSCRIPTION OR CONFERENCE REGISTRATION, USE LAST NAME OF EMPLOYEE PLUS FIRST INITIAL FOLLOWED BY THE MONTH AND YEAR OF MEMBERSHIP OR ATTENDANCE (ex: mallon0815)

   THESE TYPES OF FEES SHOULD BE PAID WITH AN AMEX CARD IF AVAILABLE

   4. IF PHONE BILL USE THE 10 DIGIT PHONE # FOLLOWED BY THE MONTH AND YEAR OF BILL

B. All checks will be mailed to the payee unless an AP staff member has granted permission to pick this check up.

C. **THIS FORM SHOULD NOT BE USED TO PAY AN INDEPENDENT CONTRACTOR. A PURCHASE ORDER SHOULD BE ISSUED BEFORE SERVICE IS RENDERED. ONCE SERVICE IS RENDERED AN INVOICE SHOULD BE SUBMITTED TO ACCOUNTS PAYABLE REFERENCING THE PO #.**

### VENDOR ID

See instructions on how to find this ID on sheet 2.

<table>
<thead>
<tr>
<th>VENDOR ID</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

### VENDOR NAME:

ADDRESS:

<table>
<thead>
<tr>
<th>CITY:</th>
<th>STATE</th>
<th>Zip:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

### INVOICE #:

<table>
<thead>
<tr>
<th>INDEX and ACCOUNT CODE</th>
<th>GROSS $ AMT</th>
<th>DISC.</th>
<th>NET $ AMT.</th>
</tr>
</thead>
<tbody>
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<td></td>
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<table>
<thead>
<tr>
<th>TOTAL NET $ AMT</th>
<th>$0.00</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>DUE DATE:</th>
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### DEPT. APPROVAL:

**please print name here**

**DATE:**

**please sign here**

### COMPLIANCE CHECK:

**AP use only**

**DATE:**

If no invoice attached, then please provide a description of goods/services provided (below).

Payee is a Foreign National and I have confirmed that their immigration status allows for this payment.

The payee's VISA status is: [ ]

**>>>>>ONE DPAY MUST BE COMPLETED FOR EACH INVOICE!<<<<<<**