

Payment Input Form

MMARS Voucher # _____

PSoft Voucher # _____
(Controller's Office Information)

MMARS Reference/Invoice Information

Purchase Order # _____

Fiscal Year _____

MMARS Vendor# _____

Vendor Name _____

Invoice Amount _____

Invoice Number(s) _____

Partial

Must check one

Invoice Date(s) _____

Final

PeopeSoft Information

SpeedType _____

Fund _____

Dept ID _____

Proj/Grant _____

Account _____

Prepared By

Title

Date

Approved By

Title

Date

****Complete this form and attach original Vendor invoice****