



**PAYEE INSTRUCTIONS**  
**ITEMS (A) THROUGH (G) ARE TO BE COMPLETED BY PAYEE**

**(A) VENDOR IDENTIFICATION NUMBER**

Complete the payee identification field with the federal employer identification number assigned to the business or the social security number if the payee is an individual.

**(B) TERMS**

The terms of sale, such as "Net," "2% fifteen days," etc.

**(C) TOTAL AMOUNT**

Enter the total amount of this payment voucher.

**(D) PAYEE NAME AND ADDRESS**

The name of the individual or company to whose name the check shall be drawn and the complete address where the check shall be mailed.

**(E) SEND COMPLETED FORM TO:**

The Department, Division, Bureau or Institution to whom the materials or services were furnished.

**(F) PAYEE DECLARATION**

Payee must sign the declaration and date the payment voucher is prepared.

**(G) PAYEE REFERENCE NUMBER**

Payee must show his own invoice or billing number or any other identification for reference purposes. **This information is recorded on the check stub and aids the payee to identify the invoices which have been paid.** Do not use more than 30 characters.

PAYEE IS TO COMPLETE THE SCHEDULE OF ITEMS OR SERVICES SHOWING QUANTITY, UNIT, DESCRIPTION, UNIT PRICE AND AMOUNT. IF THE NUMBER OF ITEMS EXCEEDS THE SPACE, ATTACH A SCHEDULE SHOWING THE REQUIRED INFORMATION.

TO INSURE PROMPT PAYMENT, SEND COMPLETED PAYMENT/VOUCHER TO THE DEPARTMENT/AGENCY SHOWN IN ITEM (E)

VENDORS MAY BE ENTITLED TO INTEREST ON PAYMENT VOUCHERS IF PAYMENT IS NOT MADE WITHIN 60 DAYS OF THE DATE OF ACCEPTANCE OF A PROPERLY EXECUTED PAYMENT VOUCHER OR RECEIPT OF GOODS OR SERVICES, WHICHEVER IS LATER. **INQUIRIES SHOULD BE MADE DIRECTLY TO THE DEPARTMENT OR AGENCY SHOWN IN ITEM (E)**