



NEW YORK UNIVERSITY BUSINESS PAYMENT FORM

(REVISED MARCH 2012)

Form BUS5000
For Accounts Payable Use Only

When a Purchase Order is not required, use this form to arrange for payment to a business entity with a Federal Tax I.D. number. (Refer to the Purchasing Web site www.nyu.edu/purchasing.services or the Controller's Division Web site www.nyu.edu/financial.services/cdv for further information.)

You must provide **ALL NONRESIDENT PAYEES** with a Tax Compliance Notification (for Payments via Accounts Payable) form. The Payee must then provide you with a completed Tax Compliance Notification form. Send the completed Tax Compliance Notification form, directly to the Nonresident Alien Tax Specialist. All non-U.S. Company/Entity payees will then be contacted by the NYU Tax Department to obtain additional tax forms via GLACIER, an online tax compliance system. More information can be obtained from the Controller's Division Website (www.nyu.edu/financial.services/cdv).

NOTE: Failure to complete information in GLACIER and/or to submit forms from GLACIER, if required, may result in maximum tax withholding.

PAYEE INFORMATION

1. FULL BUSINESS NAME (INCLUDE INC., CORP., LTD., ETC.)		For Accounts Payable Use Only
		VENDOR NUMBER
2. ADDRESS		5. ENCLOSURE TO BE MAILED WITH CHECK (Extra copy of invoice must be attached.) <input type="checkbox"/> YES
3. FEDERAL TAX ID NUMBER	4. DEPARTMENT TO BE CHARGED	6. HOLD FOR PICK-UP? (For extra ordinary circumstances only. Print name and telephone number.) <input type="checkbox"/> YES

EXPENSE/ACCOUNT DETAILS

7. INVOICE NUMBER (up to 12 char.) OR DESCRIPTION (6 char./digits) & SERVICE DATE (SEE INSTRUCTIONS)	8. INVOICE DATE OR DEPARTMENT PROCESS DATE	9. AMOUNT	10. CHARTFIELD					TAX CODE
			ACCOUNT	FUND	ORG/DEPT	PROGRAM	PROJECT	
		\$						
TOTAL AMOUNT		\$						

11. TOTAL AMOUNT REQUESTED (IN WORDS)
12. DESCRIBE FULLY THE NATURE OF THE PAYMENT (Description will not appear on the check)

13. SIGNATURES/APPROVALS

CONTACT PERSON	CONTACT PERSON'S EMAIL ADDRESS	TEL. NUMBER	DATE
NAME OF APPROVER	SIGNATURE OF APPROVER	TEL. NUMBER	DATE