

**THE UNIVERSITY OF ARIZONA  
FOUNDATION**

1111 N. Cherry Ave., Tucson, Arizona 85721 PO Box 210109

**Request for Gift Disbursement**

Restricted (02)      Endowment (04)      Board Designated (05)

PREPARED BY \_\_\_\_\_

DATE SUBMITTED TO FOUNDATION \_\_\_\_\_

DEPT NAME AND CAMPUS ADDRESS \_\_\_\_\_

PHONE NO \_\_\_\_\_

PO BOX \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

Unless otherwise stated under special instructions, check will be mailed to payee.	<b>THIS SECTION MUST BE COMPLETED</b>
<b>Payee:</b> _____ (full legal name required)	Is payee UA Employee?    Yes    No Is payee UA Student?    Yes    No
<b>Address:</b> _____ (Home address if payee is an individual) (Business address if payee is a business)	Is payment to or for the benefit of a non-resident alien?    Yes    No <i>(If the answer to this question is yes, the payment must be processed through the UA.)</i>
_____ _____ Zip: _____	I certify that this expenditure of funds is consistent with the donor restrictions for this account. Payee <i>may not</i> sign their own reimbursement.
<b>S.S. No</b> _____	Approved by _____ Date _____ <b>(X)</b>
<b>Fed Tax ID</b> _____	<b>(X)</b>

<b>U of A Business-Related Purpose of Payment</b>	<b>Special Instructions</b>
For Payment, attach original receipts and invoices. <a href="#">Documentation Information</a> For Multiple Receipts, a reconciling spreadsheet is required. <b>NEW:</b> For purchases over \$1,000, please complete and forward the attached form.	Call for Pickup Return Check to Dept. Place in UAF mailroom box RUSH (\$25 fee for Service) Mail to Alternate Address  _____ _____ _____

Account Number	Object Code	Account Name	Amount

<b>To be completed by the University of Arizona Foundation</b>		
Processed by: _____	Date _____	Check No: _____
Comments: _____		