



Vendor Request

New Vendor Request Update Existing Vendor

*** indicates Required Field**

Be sure to include this form as an attachment when submitting your Payment Request

***Request Date**

Requestor Info:

***Requestor Name:**

***Requestor Phone**

***Requestor Department:**

***Requestor Email:**

Vendor Info:

***Vendor Number:** (include when updating an existing vendor)

***Vendor Name:**

For Individuals enter (First, Middle and Last Name)

Payment
Terms:

Name Continue:

***Country:**

***Street Address 1:**

***City:**

Street Address 2:

***State:**

***Zip:**

Comments:

When paying for Award, Consultants, Honorarium, Lecture, Legal Fee, Rent, Royalties, Research Subject, and services to individual or company use the [W9 form](#) or visit [Independent Contractor-Payroll](#) at <http://finserv.uchicago.edu/payroll/independent/index.shtml> for additional documentation requirement.