

Request for Third Party (Vendor) Payment Form

The purpose of this form is to explain and authorize charges appearing on a vendor invoice or statement.

Mail this form along with invoices or statements in your possession to the NDLA Treasurer.

** If the invoice or statement will be sent directly to the NDLA Treasurer by the vendor, you may submit the electronic version of this form. See the link for the form on the NDLA web site.*

Name of Vendor: _____

Address of Vendor: _____

Vendor Phone Number _____

Date of Purchase or Service: _____ **Expense Amount:** \$ _____

Description of Purchase or Service (include quantity):

Purpose of Purchase or Service:

Name of NDLA Budget Category (e.g., Executive Board, Section / Round Table, etc.):

Name of NDLA Member Responsible for Expense _____

I certify that the expenses on the vendor invoice / statement are accurate.

Your Signature _____ **Date of Request** _____

Your E-mail address: _____ **DT Phone:** _____

Please return form with an invoice and direct questions to Aaron Stefanich, NDLA Treasurer, Grand Forks Public Library, 2110 Library Circle, Grand Forks, ND 58201