

REQUEST TO PAY FOR SERVICES WITHOUT A CONTRACT

Fill out form, attach direct voucher and invoice. Once completed please submit on our [AP webpage](#)

Request from: _____ Date: _____
Name and Title

Dates of service:	Cost of service:
Service provided:	
Reason a contract was not in place:	
Corrective action to ensure compliance with contracting rules:	
Account code to be used to pay for service:	
Area Director's or Chief Name:	
Area Director's or Chief signature:	Date:
CFO Office Use	
Approval to Pay:	
_____ Date: _____	
Tracy Pinder, Director of Finance	