



# Agency Payment/Withdrawal Request

[Enter a ticket in Aggie Service Desk](#)

Instructions: Use this form for agency payments, reimbursements and cash withdrawal. 1) Compile all information on request. 2) Include signatures required. 3) Retain on copy of request for agency files. 4) Submit a ticket in Aggie Service Desk and attach form and supporting documentation if required.

Cash Withdrawals: Present approved form to the University Accounts Receivable Cashier's Office, located in the Educational Services Building within one business day. Withdrawals over \$1,000 may require additional days to process. Contact University Accounts Receivable Cashier's Office for details (BPM 8.05.10).

## SECTION 1: CONTACT INFORMATION

Date (mm/dd/yyyy): \_\_\_\_\_ Organization / Club Name: \_\_\_\_\_

Requestor/Contact Name: \_\_\_\_\_ E-mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Advisor/Authority Name: \_\_\_\_\_ E-mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_

## SECTION 2: REQUEST DETAILS

Payee Aggie ID: \_\_\_\_\_ Payee Name: \_\_\_\_\_

Remit To Address: \_\_\_\_\_  
Street / PO Box \_\_\_\_\_ City, State, Zip \_\_\_\_\_

| Description of Goods or Services / Purpose of Withdrawal | Amount |
|--|--------|
| 1.   |        |
| 2.   |        |
| 3.   |        |
| 4.   |        |
| 5.   |        |
| <b>Total</b>   |        |

| Index | Fund | Account | Amount |
|-------|------|---------|--------|
|       |      |         |        |
|       |      |         |        |
|       |      |         |        |

## SECTION 3: OFFICIAL APPROVAL

*I hereby certify balance is available to support the cash withdrawal or payment requested and funds will be used as stated above.*

### Department Authority

Aggie ID: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Advisor/Authority

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty/Staff Advisor     Authorized Organization Member     Arrowhead, Inc.     Aggie Development, Inc.

## SECTION 4: AGGIE SERVICE CENTER APPROVAL

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Reset