

## **Payment Processing**

### **Add an Individual Supplier for Payment/Reimbursement**

*Please complete the following information along with the attached W-9 Form and send the completed pages to the contact at the bottom of this page.*

Requestor:

Reason for  
Payment:

*i.e. Guest Speaker, Student, Potential Employee, etc.*

Department:

Email:

Phone:

Payee Name:

Fax to 412-648-0348

OR

Email to [PaymentProcessingCS@cfo.pitt.edu](mailto:PaymentProcessingCS@cfo.pitt.edu)

## Embedded Adobe XML Form

The file <http://www.irs.gov/pub/irs-pdf/fw9.pdf> is an Adobe XML Form document that has been embedded in this document. Double click the pushpin to view.

