## NOTICE TO ACCOUNTS RECEIVABLE

Submitted by: $\qquad$ Date Submitted: $\qquad$

## PLEASE SUBMIT A BILL TO:

Agency Name: $\qquad$
Contact Person: $\qquad$
Mailing Address: $\qquad$
Phone number: $\qquad$
Email Address: $\qquad$
Description of expense/program:

Billing Total:
Account Code(s):

| Fund | Resource | Year | Goal | Function | Object | School | Management | Total |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
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Item(s) to bill:

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$\qquad$
$\qquad$
$\qquad$

Please attach backup documentation.

Other instructions:

Any time a requisition or other item is coded to Resource 0901, please submit this form along with a copy of any backup to the Business Office, Attn: Accounts Receivable.

