



## **AFTER THE FACT PAYMENT REQUEST**

Request for After the Fact Payments require the signature of the college Budget Officer and Dean/Department Head. Examples of situations requiring a request include, but are not limited to:

- Services performed or goods received without an approved and fully executed contract
- Services performed or goods received where proper policies and procedures were not followed

---

**Instructions:** Please complete the information below, obtain the necessary signatures, and forward to [purchasing@ewu.edu](mailto:purchasing@ewu.edu), along with a copy of the Vendor/Contractor's W-9 for approval.

**DEPARTMENT:**

**Budget Information:**

**INDEX:**

**ORG:**

**Account Code:**

**Employee Purchasing Services:**

**Phone:**

**Email:**

**Vendor/Contract Name:**

**Vendor Invoice No:**

**Dates of Services:**

**Cost:**

**DESCRIPTION OF SERVICES/GOODS:**

**JUSTIFICATION FOR PAYMENT REQUEST:**

**MITIGATION PLAN TO ENSURE COMPLIANCE WITH FUTURE PURCHASES:**

---

**SIGNATURES:**

PURCHASER:

\_\_\_\_\_  
Signature

Name:

Title:

Date:

**BUDGET OFFICER:**

\_\_\_\_\_  
Signature

Name:

Title:

Date:

**DEAN/DEPARTMENT HEAD:**

\_\_\_\_\_  
Signature

Name:

Title:

Date:

---

**FOR PROCUREMENT &  
CONTRACTS USE ONLY**

Approved: \_\_\_\_\_

Date: \_\_\_\_\_

Returned for Additional Information: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Director, Procurement & Contracts

Date: \_\_\_\_\_