

FI 050
07/2022
Division of Finance



Record Date
Fiscal Year
Period
Vendor Customer
**Name
**Alias/DBA
**Address

Document Number.		
Code	Department	ID

Email completed form to:
financesupport@utah.gov

For questions, call (801) 957-7750

Single Payment Yes No

Scheduled Payment Date

Department Control Number (Not Recorded in FINET)

Handling Code Document Total

Disbursement Format **City **State **Zip

GENERAL ACCOUNTING EXPENDITURE / PAYMENT REQUEST

Invoice Number			Invoice Line		Invoice Date			Ref Doc Code	Ref Doc Dept	Ref Doc ID	Ref Vendor Line	Ref Comm Line	Ref Acctg Line	Ref Type
Line	Amount	Fund	Dept	Unit	Appr	Object	Rev Srce	BSA	Activity	Function	Program		Phase	
Description													Event Type	

*Fields Required to Submit Form

*Prepared By

*Dept / Unit

Phone

Email

**Required for Misc. Vendor only.

*Department Name

*Division

*Submitted Date

