



# Request for Issuance of Check (RFIC) Form

- 1. Submit to Accounts Payable, Non-PO Desk, Mailstop 971-AP
- 2. Include original itemized receipts
- 3. Vendor must have Form W-9 (U.S. vendors) or Form W-8 BEN (Foreign vendors) on file with LBNL prior to payment

### Employee / Payee Information

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

Business Address or Mailstop: \_\_\_\_\_

Mailing Address if Different from Above: \_\_\_\_\_

Trip Number (if applicable): \_\_\_\_\_ Employee ID (if applicable): \_\_\_\_\_

### Payment Explanation/Business Purpose/Remittance Advice Information

Project ID	Resource Category	Invoice Date	Invoice No.	Total Amount (\$)
<b>TOTAL ACTUAL COST:</b>				

### Event/Meal Costs

EVENT ID (from Event Approval Database): \_\_\_\_\_

ORIGINAL approved estimate TOTAL: \$ \_\_\_\_\_

\*Provide a brief explanation if TOTAL **ACTUAL COSTS** on this RFIC exceed the allowable limit or if the costs exceed the approved budget/estimate by \$250 or more.

FOOD AND BEVERAGE COSTS FOR **ONSITE EVENTS** (incl. tax & tip):  
 Was the TOTAL ACTUAL COST per person/per meal within the allowable limit?  Yes  No\*

Onsite Allowable Limits (Delivery Charges Do Not Apply)	Location	Refreshments (a.m. or p.m.)	Lunch	Dinner
	Oakland/Berkeley	\$14.75	\$20.00	\$41.00
	Walnut Creek	\$14.75	\$20.00	\$46.00

### Contact / Approver Information

Prepared By: \_\_\_\_\_

Preparer's Phone No.: \_\_\_\_\_

I certify these expenses are allowable and incurred for the official business of Berkeley Lab in accordance with policy. The expenses claimed are not reimbursed by others.

\_\_\_\_\_

**Payee's Signature** (not required for vendors)

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

I certify these expenses are allowable and represent official Berkeley Lab business to be charged to the projects listed.

\_\_\_\_\_

**Approver's Signature** (cannot be requesting employee)

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

\_\_\_\_\_

**Print Name of Approver** (must be authorized in the SAS)

\_\_\_\_\_

**OCFO Approver**