



REQUEST FOR MISCELLANEOUS PAYMENT WITHOUT AN INVOICE
T-27 FORM

Important: **Do not** use this form if:

Date: _____

- A vendor record hasn't been created in IRIS. A vendor must be requested and created before submitting this form.

Vendor Name: _____ IRIS Vendor #: _____

Address: _____ SSN/ITIN/FIN#: _____

Contract #
(If applicable): _____

UT Departmental Name: _____ Amount Requested: _____

UT Departmental Email: _____

Amount Requested				
Hour/Day/Week/Lump Sum		X Rate		= Amount to Pay:

Dates of Service: _____ to _____

Description of services or goods being provided: _____

- If payment is to an **individual**, do the services listed on the worker's classification questionnaire attached to their vendor record in IRIS agree with those listed on this form? **This does not apply if the vendor is a company or other entity.** Yes No

If "No", an updated worker classification questionnaire needs to be completed and attached to this form.

- Is the payment to a university employee? Yes No

Only royalty and clinical trial payments may be processed to employees. All other payments must be made through payroll or an exception granted by the Treasurer's Office.

- Is the payment to a current or future UT student? Yes No

If yes, a written correspondence must be obtained from the campus financial aid office and attached to the request.

- In what Country were these services performed? _____

- Were the services performed by a non-resident alien? Yes No

If yes, the University's Independent Contractor/Guest Traveler form and all applicable documents must be attached to this request. Visit the System Payroll Office website to learn more about the forms required for these payments – <http://payroll.tennessee.edu/>

Fund	G/L	IO	Amount	Approval