



University Shared Services

REQUEST FOR ACCOUNTS RECEIVABLE PROCESSING

Please fill out all information below and email to : musharedservices@missouri.edu. For processing an invoice for item(s) sold to an entity other than the University of Missouri.

Dept Contact & Node: Date: Customer #:

Dept Billing Specialist: Invoice Type:

Customer Name: Customer PO #:

Attn To: City/State/Zip:

Street Address: Contact Info:

Item #1 Description: (limit 28)	Quantity:	Unit of Measure: (i.e., USD)	Unit Price:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Mocode: <input type="text"/>	PS Account: <input type="text"/>	

Item #2 Description: (limit 28)	Quantity:	Unit of Measure: (i.e., USD)	Unit Price:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Mocode: <input type="text"/>	PS Account: <input type="text"/>	

Item #3 Description: (limit 28)	Quantity:	Unit of Measure: (i.e., USD)	Unit Price:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Mocode: <input type="text"/>	PS Account: <input type="text"/>	

Standard note to appear on invoice: (limit 254)

Request details: